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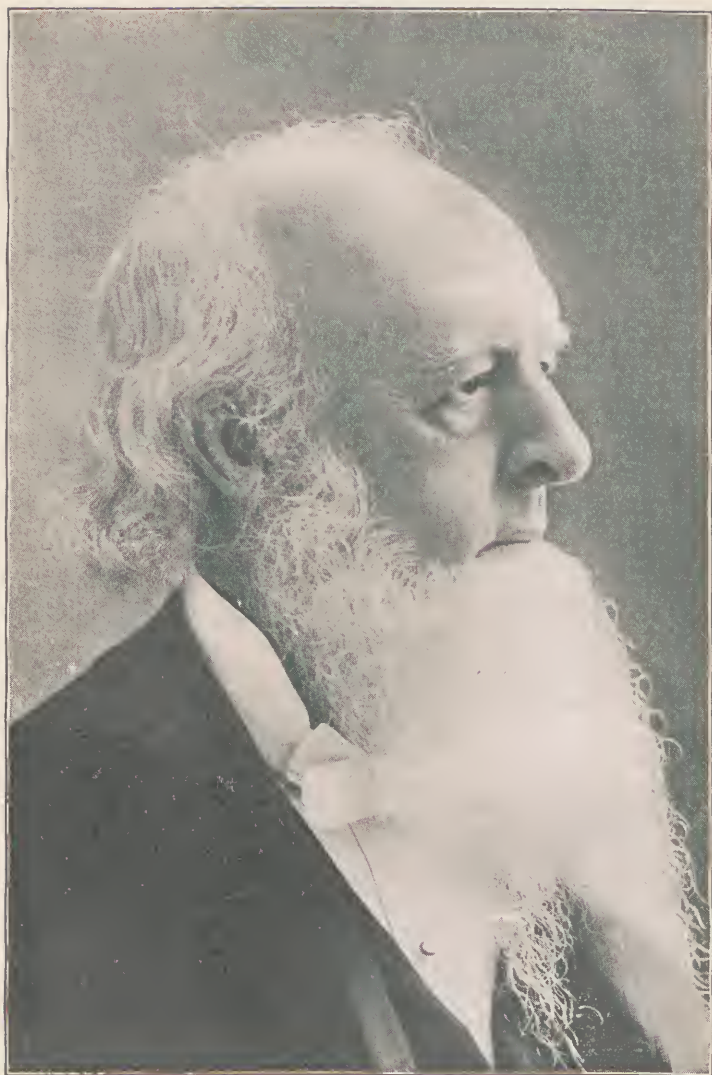
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**CORNER WILLIAM AND ANN STREETS**

**NEW YORK**

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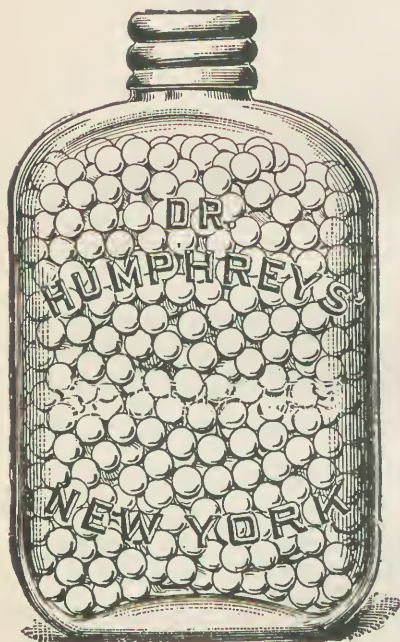
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OR

## FAMILY ADVISER

IN THE USE OF

### HUMPHREYS' HOMEOPATHIC REMEDIES,

✓  
BY

F. HUMPHREYS, M. D.

Formerly Professor of Institutes of Homeopathy, Pathology and Medical Practice in the  
Homeopathic Medical College of Pennsylvania at Philadelphia; Author of  
Dysentery and its Homeopathic Treatment; Cholera and its Homeopathic Treatment; and Prover of Apis Mellifica,  
Plantago Major, etc., etc.

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# P R E F A C E.

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IT IS NOW over thirty years since I commenced the experimentation and use of COMBINED MEDICINES, the results of which, in a popular, practical form, I present in this work. I waited long, perhaps too long, that I might not be accused of rashly offering crude or immature REMEDIES; and yet, remembering how little comparatively, one man can do in so wide a field, in even so long a period, I could wish the time longer, and the experience more ample. If it shall lead to greater precision in the use of medicine, and a more complete control over human disease and suffering, my labor will have been amply rewarded. The snatches of time for its production, taken from the exactions of large professional and business cares, must apologize for any want of unity or defects of style that may appear in its composition.

The theme is new. Old-school medicines have been compounded or combined for centuries, and Polypharmacy has been the rule, as well as the opprobrium of its practitioners. The rule of Hahnemann was exact and rigorous—one medicine, in its highest attenuation, given once, and permitted undisturbed, to expend its action—formed the ideal of his Homeopathic practice. To this rule, the professor and the amateur, the adept and the satellite, were expected to conform. The choice of the medicine was to be made, not so much according to the physiological or pathological law of cure, as according to some

*keynote*, or fantastic aberration, alike of medicine and disease, the study of which seemed to some minds a psychological phantasmagoria.

But practical men and practical medicine, with too little, perhaps, of faith and too little, certainty, of result, unwilling to attribute all failure to the bluntness of their own perceptions, hesitating to follow the shadow of the master, when their footsteps so often fell on dead men's bones, turned aside to seek more substantial footing in larger doses, frequent repetitions and alternation of remedies. The success became as sure, the labor less, and the way plainer. But what then becomes of the ideal philosophic rule—the one medicine, the one dose, and undisturbed action? It is buried, in a sea, so deep, as to be practically fathomless.

But what becomes of the *similia*, the law of cure, when modes so different, paths so apparently divergent, lead to the same goal? Simply this: THE LAW OF CURE IS WIDER THAN WE KNOW. Not to so narrow channels as we have believed, are the waters of this Bethesda confined. Simple and childlike may his faith be, who believes that in his method alone is the cup of healing; a deeper knowledge and wider experience would have placed it in the hands of others as well.

From alternated to combined medicines the transition is easy. The old rule of faith and practice is gone. A wider field is opened and we are invited to enter. Shall the *similia* in one, or the *similia* in several be accepted; shall the *similia* be the occasional aberration, or the physiological counterpart? So we seek out the law of combination, and adapt our specific *similia* to the Pathological individuality.

With all progress, and every improvement, there comes the wail of dissatisfaction and reproach. These they say

are avoiders of honest toil, scalers of Heaven's walls without needful faith or purity, who seek by a broader road the Divine way to mysteries of life; indolent ones who, while they neither toil nor spin, yet assume the gorgeous array of Solomon. But what is progress but a lessening of human toil! From the beginning, every improvement diminished somebody's work; made some hours of toil superfluous, so that this reproach becomes a praise. If it gives increased certainty of result, all the better.

That some obscurity should overshadow the pathway that leads from disease out into the highway of health, seems inevitable. To reduce this obscurity to its minimum, should be the tireless aim of scientific effort. Should there be but one dim path, we should seek to render it plainer, less devious, and less obstructed. Should there be many, we will reverently uncover our heads, and be thankful. Multitudes having gone along in the simple, open path of specific medicine, have been led to the Elysium of health, and with gratitude acknowledge the blessing. It is to afford additional light to the thousands yet in the path, that these pages are written. Additional observation and experience will doubtless suggest improvements, giving simplicity to the direction, and certainty to the result, yet such as it is, it is offered in confidence that it will afford substantial aid to thousands.

As this work is designed for the use of the People, its most conspicuous feature should be its entire adaptation to their wants. It must give such counsel and advice as they need in their quest, not merely for the recovery of lost health, but for the preservation and improvement of health. The latter—the preserving of health—may be really more important than the former, though it be an often overlooked and sometimes thankless task, for, “who thanks you for what you prevent?”

So in these pages much space is given to the study of hygiene—air, water, food, drainage, the nutritive value of different foods, and the best manner of cooking and serving them. The use of baths, stimulants, beverages; the nursing and care of children, of the sick, the invalid, the aged and infirm. To these there is added in their appropriate chapters and under proper headings a simple description of the various diseases most commonly met and most likely to be successfully treated either at their beginning or throughout their course by domestic practice. Then there follows such plain and simple directions for nursing, food, and the use of the REMEDIES, as are most readily followed and most likely to result favorably. The whole intent is to make the way so plain that even the most inexperienced of intelligent persons may follow it without confusion or error.

This method could only have been made so plain by the use of these REMEDIES. In no other way could the liability or danger of perplexity and error have been avoided. There is no seeking among many medicines for the right one; no devious or intricate mode of preparation, before administering; all is prepared as wanted, and the one requirement is to simply follow the simple directions.

F. HUMPHREYS, M. D.

JULY, 1889

# INTRODUCTION

---

Any deviation from the normal standard of health constitutes disease: through a slight impairment or derangement of some bodily function, a failure of the organism to respond promptly to its environment, or an organic lesion with extensive alteration or destruction of tissue. All acute diseases tend towards recovery, and it is the office of medicine to assist and promote, through their action on the cells and the tissues of the body, such recovery. Chronic disease is a condition where through long continued action against morbid influences, the resistance of the cells and tissues have become greatly impaired, and deranged function and altered tissue have resulted.

It is not unfrequently observed that several members of a family are subject to some peculiar disease or morbid condition, and that father and son, or mother and daughter, in turn, are subject to the same disease. Sometimes nearly a whole family die in the course of a few years from consumption; sons are afflicted with gout, salt rheum or rheumatism as their father was before them; daughters with cancer as their mothers or grandmothers were. The impression hence generally prevails that these diseases are inherited. The fact of disease frequently appearing under such circumstances is undisputed. It is quite certain that as each parent imparts to its offspring its own type and peculiarities, its tendency to be lean or



corpulent, large or small, delicate or stout, so with the bodily organization there may be a tendency to assume or, take on diseased action in a certain form.

It is now generally conceded that disease is not transmitted through heredity from parent to child but in every case is caused by the introduction of some disturbing element into the human system throwing it out of harmony with its environment. It is not denied that there exists a certain susceptibility and tendency in families, making them more liable to contract certain diseases. This is as far as we can go, and should banish all fear that the child must necessarily inherit the disease of the parent.

It is not usually difficult to arrest such tendencies in the bud, by the appropriate use of Homeopathic Medicines; and they only require to be understood and guarded against by proper habits and medication, in order to ward off danger from such sources. The medicines and measures of prevention against such diseases will be indicated in their appropriate sections.

Disease may be classed as acute, sub-acute, or chronic, a purely arbitrary distinction, one condition gradually merging into the other. It may appear as a functional derangement, or as an organic lesion.

It may be questioned if any impairment of function can long exist without producing an organic lesion. Modern medicine has made immense strides during the past fifteen or twenty years in our knowledge of the causation of disease, through the patient researches of eminent medical scientists both in this country and abroad.

Modern medicine deals largely with the infinitesimal. The large number of diseases we now know to be caused by micro-organisms and the still larger number that by analogy we infer to be so caused, leave a comparatively



small number, the causation of which is still problematical.

Micro-organisms or microbes are the smallest organisms discernable under the microscope. Micro-organisms that cause disease are the protozoa—the lowest form of animal life, and the bacteria, the lowest form of plant life. The bacteria that cause disease are known as pathogenic bacteria. The different forms of bacteria are:

Cocci, . . . . Small dots or spheres

Bacilli, . . . Small straight rods

Spirilla, . . Small spiral rods

The bacilli are by far the most common. Bacteria vary greatly in size, the bacillus of influenza being the smallest. There are probably bacteria so small as to be invisible to our most powerful lenses.

Micro-organisms or germs of disease may obtain entrance into the body through a wound, injury, or abrasion to the skin or through the lining membranes of the organs. Again certain germs may be absorbed through the free surfaces of the skin or of the mucous membranes. The natural orifices such as the nose, mouth and air passages are a favorite place of lodgement. Invading the organs and tissues of the body they may be localized and by their disturbing activities give rise to impairment of function and destruction of tissue, and by the poisons they secrete and pour into the circulation, produce toxic or poisonous effects throughout the entire system, as in the case of diphtheria, and tetanus, or “lock jaw”. The germs may enter directly in the circulation, attack, modify, or destroy the cells in the blood vessels and lymphatic ducts and glands. They may be transported to distant parts of the body causing alterations and organic lesions of tissues. Malaria and yellow fever are instances where germs or parasites cause the destruction of blood corpuscles in the first instance, followed by

serious changes in the organs and tissues. Germs have a specific action on certain tissues. The typhoid bacilli for the small intestines, the tubercle bacilli for the lungs and air passages, although different varieties of the tubercle bacillus may be found in almost any organ or structure of the body.

Exposure to the bacteria of infection does not necessarily imply that the individual exposed will always contract the specific disease. We are constantly exposed to various infections without contracting disease. While pneumonia is prevalent it is estimated that one in every three persons will be found carrying the bacteria of pneumonia in their nostrils or air passages. We constantly breathe in the bacilli of tuberculosis and bacteria of pneumonia yet how few thus exposed ever contract either of these diseases. Infection depends upon (a) the number of germs taken into the system, (b) their virulence, (c) the resistance of the individual. The number of bacteria required to infect varies quite largely with the specific micro-organism, in this respect there being a great range in their virulence. The virulence of germs of the same species vary greatly as to the season of the year, the locality and the stage of the epidemic. In epidemics the worst cases usually are the earliest ones, gradually the epidemic dies away with fewer and lighter cases. There is a great degree of variation in the individual resistance, not only in the natural resistance, but in the impaired resistance caused by fatigue, care, worry and exhaustion, or insufficient nutrition.

Micro-organisms or bacteria abound everywhere. The animal that lives, the plant that grows, the processes of fermentation, putrefaction, decay and death, our own comfort and well being, are all dependant upon bacteria. Among the countless myriads of beneficent micro-organ-

isms there are others, pathogenic organisms, the producers of disease. Many of these latter, ever present, are ready wherever the appropriate conditions exist, to propagate, multiply, and exert their baneful effects. Fortunately these pathogenic micro-organisms cannot develop outside the body, except in certain favorable media, as in milk. Light and air are death and destruction to them. The range in temperature in which they may thrive is exceedingly limited. Birds or fowls are not subject to anthrax, the normal temperature of the blood being too high for the bacilli to exist; but by cooling the blood sufficiently, fowls may be inoculated. The question of immunity is of vast importance. After the invasion of the system by micro-organisms, and after the disturbance caused by their presence has subsided, there follows a period of immunity against further attack by this specific organism. This immunity may extend from a few weeks or months, to years, differing as to the individual and to the specific disease. This immunity differs as to the species and race. Carnivorous animals are not subject to glanders, anthrax or tuberculosis, as are herbivorous. Glanders and anthrax are rarely contracted by man. The Negro and Indian are very susceptible to tuberculosis and smallpox, but are largely immune to malaria and yellow fever.

The blood consists of red and white corpuscles swimming in a liquid plasma or serum. The white corpuscles are called Leucocytes, and play a most important part in disease. They have been justly termed the "police or scavengers" of the system. They possess the power of devouring and destroying micro-organisms. Wherever a wound or abrasion occurs, or at whatever point the organism is invaded by the germs of disease—there you will find the white corpuscles or leucocytes fighting valiantly for the preservation of the organism. Diseased action

is followed by a great increase in the number of white corpuscles in the immediate tissues. Pus or matter is composed of dead Leucocytes—which have been over-powered by the micro-organisms or their toxins.

After the first invasion of the system by micro-organisms the cells of the body soon acquire the power of protecting themselves by producing anti-bodies or anti-toxins to neutralize the toxins produced by the invading micro-organisms. After the micro-organisms have been destroyed and their toxic or poisonous products eliminated from the system, the cells for a long time still go on producing in a lessening degree an antitoxin and it is this surplus antitoxin that constitutes immunity.

This immunity to disease in the individual or race is called the *natural immunity*. *Active acquired immunity* is a condition that exists after the disease caused by the specific micro-organism having spent its force, the system has *acquired an immunity* against further attacks from this specific micro-organism.

*Passive acquired immunity* is a condition caused by the artificial introduction into the system of a serum, vaccine, drug, or chemical, whereby the system is fortified against attacks of a specific micro-organism.

There is another class of disorders known as septic poisoning, or auto intoxication, caused by the absorption of broken down tissues or the product of putrefaction in the glands or intestines; articles of food undergoing the process of decay taken into the alimentary canal produce *ptomaines* and their attendant symptoms. The liver is a large gland; one of its principal functions being to de-intoxicate or purify the blood as it flows through the liver from the alimentary system to the heart. All these changes are chemical, but due primarily to the action of bacteria. The feeling of malaise, headache, or “out of

sorts'', the ''liver out of order'', is generally due to the failure of the de-intoxicating power of the liver and necessary eliminating glands.

Germis of disease obtain entrance to the system largely by means of the fingers, food, and flies. Unclean hands and dirty fingernails are probably responsible for a large proportion of infectious diseases. Underneath the fingernails, unless properly cared for, we have a most ideal condition for the culture of pathogenic bacteria. This fact is so clearly recognized that no surgeon will operate until the hands and fingernails have been thoroughly washed and sterilized and then protected by rubber gloves. This should also be the case with nurses handling patients where there is the least danger of spreading infection. Personal contact is the most common way in which disease is spread.

Bacteria requires moisture in order to live; exposed to the air they soon dry and lose their vitality or power for doing harm: hence, the sputa, in which the bacteria swarm, live, and propagate is a constant source of danger. The spray thrown off in coughing or sneezing, carry germs that may be inhaled by persons near the patients. Realizing that the secretions of the throat, mouth, nostrils, and decaying teeth, are the breeding places, and swarm with bacteria, it should be the duty of every one to cleanse these passages with antiseptic solutions or sprays every morning and night. Four grains of menthol to an ounce of liquid vaseline is an excellent antiseptic spray, used with an atomizer.

In recent years attention has been directed to human beings as the carriers of disease. After an attack of infectious disease, and after the apparent recovery of the patient, there persists in the secretions of the patient for a longer or a shorter period, the bacteria of infection,

rendering him a source of danger, and capable of spreading infection. This is especially so of typhoid fever patients. It is now recognized that the bacilli of typhoid exist and go on multiplying in the glands of the patient, especially in the gall bladder and duct, for weeks, months, and in some cases, years. Cases have been recorded, as in the case of "Typhoid Mary", now become classic, where the subject never has had the fever, and yet the secretions swarm with germs capable of imparting the disease to others.

Streams and wells may become polluted. In country districts this is a common source of typhoid infection. Running water soon frees itself of microbes; not so wells or stagnant pools, microbes persisting in these for a long time. The bacteria of typhoid has been found in ice. The physical process of freezing will eliminate 90% of the germs, and it is doubtful if the few remaining will possess sufficient power to do harm. In milk we find the most ideal conditions for the culture of micro-organisms. In this medium they live, thrive and multiply. An eminent American physician has said, that there is no more reason for drinking raw milk than there is for eating raw meat, and there is a great deal of truth in his statement. Milk is a most prolific source of infection. To diminish the danger in drinking milk, it should be pasteurized; that is, heated to 145° Fhr. for a space of twenty minutes. This will not impair the taste, and will kill most germs. To make milk absolutely safe, it should be brought to the boiling point or sterilized, but as this is objectionable for many reasons, and as its nutrient value is thereby greatly reduced, it is done only in special cases.

Articles of food may convey disease, through the contaminating action of flies, other insects, and worms; as for instance in typhoid and cholera. Spoiled fruit and



vegetables, fish and meat undergoing the process of decay, produce ptomaine poisoning.

To the agency of flies, insects, and worms may be attributed a large class of diseases. The common house fly, *musca domest.*, is generally spoken of as the typhoid fly, owing to its frequency in spreading the germs of typhoid, carrying the germs from infected matter and depositing them on articles of food. During the Spanish-American War, the prevalence of typhoid fever at Chickamauga and other camps, was attributed mainly to flies carrying the germs of infection. The house fly cannot bite, but the stable fly can bite savagely, and has been held responsible, through its bite, for causing infantile paralysis. Fleas, through their bite, cause bubonic and pneumonic plague, having previously bitten infected rats. The tsetse fly of Africa will carry a germ from the crocodile to horses and cattle, devastating whole sections of country, and producing in man, the "Sleeping Sickness", which usually terminates fatally. The Rocky Mountain Spotted Fever, a fever in which the mortality is very high, is conveyed from infected squirrels by a tick. Among diseases caused by worms—leaving out the large number of intestinal worms—we may mention the hook worm disease, a veritable scourge in our Southern States and a gradually increasing one. *Trichina*, caused by small spiral worms, inhabiting infected pork and beef, is a condition frequently found among those who eat uncooked pork or beef.

The human body is a vast aggregate of cells. Each lives its own independent life, is born, grows, fulfills its function, dies and decays. Each fills its place, and does its own special work in the general economy of the body. All work together for the general good. Mutability, or change, is a fundamental factor of life. All structures of the body are in state of constant change; even the bony

structure, seemingly so inert, show continual growth and decay. Life, taken from a physiological standpoint, is the summation of the life of the cells.

In the cells and tissues of the body resides the latent recuperative and resisting power to overcome disease. The two factors are the strength and virulence of the invading force on the one side, and the susceptibility and natural or acquired resistance on the other.

Therapeutics, or the use of remedial agents for the prevention or cure of disease, employs the methods of Serum Therapy, Vaccine Therapy, or Chemo-Therapy; in other words the use of a serum, vaccine, drug, or chemical. An immunized serum, an antitoxin, introduced into the system will neutralize an equal volume of toxin or poison—i.e., 1000 units of diphtheritic antitoxin will neutralize and render harmless 1000 units of toxin or the poison of diphtheria; and so in regard to tetanus, hydrophobia, and all diseases where serums are used. The use of vaccines, as in the case of smallpox so generally and successfully used for many years, is now being successfully used as a means of prevention in typhoid fever and other diseases. In these cases of vaccination a slight modified form of the disease is produced, and the systems brought into a condition of *active acquired immunity*. Vaccines are preventive; serums neutralize the existing toxin or poison: while drugs and chemicals are relied upon as curative agents.

Ehrlich, the great German authority, has stated that for every specific disease there is a specific remedy.

It is a recognized fact that there is an elective affinity, as it is termed, between certain cells and tissues of the body and certain drugs and medicines.

From the beginning of medical knowledge it has been known that particular drugs affect particular organs and tissues, and of later years, that small doses frequently



administered are more efficacious than the same amount administered as a single dose. The days of drenching the system, and of large and powerful doses, are past. The evils of over-dosing, as practiced by our fathers, cannot well be over exaggerated. It requires but a small amount of the appropriate medicine to produce a great effect.

As previously stated in the cells and tissues of the body there resides the latent power to resist and overcome disease, and it is the principle of medicine to aid, assist, and stimulate the cells and tissues to this end. Small doses frequently repeated are found to be most efficacious as a means of stimulation and assistance. The appropriate remedy being administered, the system promptly responds unless the vitality has been so lowered that response is feeble or impossible. Or again the invasion of the disease may be so intense or prolonged that the powers of resistance are ineffectual.

Hahnemann was the first to formulate a law of cure *SIMILIA SIMILIBUS CURANTUR*, or "like cures like".

This law is the corner stone of the foundation upon which the practice of homeopathy rests. While many practitioners of homeopathy have carried it to absurd and ridiculous extremes, it remains to-day as the sanest and safest guide to the practice of medicine. By the means of proving the action of drugs on the human being in health, homeopaths have arrived at the symptomatic action of the drug and have applied the knowledge thus gained, to the corresponding condition where manifested in disease. This is a perfectly logical deduction based on correct scientific principles.

It remained to Dr. F. Humphreys after many years of patient research and practice of medicine to combine remedies having certain specific actions to meet certain specific diseases.

These preparations so largely and favorably known as HUMPHREYS' HOMEOPATHIC REMEDIES have now been in general use for sixty years. Gradually but surely they have made their way through their proved worth and merit throughout most of the civilized countries of the world, and they have been to many, a friend and aid in times of distress and disease.

In the pages following will be found a brief description and a guide to the treatment of the diseases commonly occurring.

### INFECTION—CONTAGION.

A large number of diseases that inflict humanity are infectious; many of them are contagious. There appears to be confusion in the minds of many intelligent persons in regard to these terms, and some physicians are not clear enough in their use.

All contagious diseases are infectious, but all infections are not contagious. It would be much better to use the term "communicable diseases", as having a broader significance.

INFECTION is the introduction into the body of micro-organisms where, by multiplication and reproduction and by the toxins or poisons they secrete, they give rise to constitutional symptoms indicative of their presence.

CONTAGION is the direct transference of a disease germ or micro-organism to another person by direct personal contact. The infection may be localized in certain tissues, as in the cases of Diphtheria, Erysipelas, Typhoid or Pneumonia; or bacteria may be carried by the circulation to distant organs or tissues and there produce local diseased conditions, as in pneumonia, typhoid, gonorrhea,

puerperal or lying in fever. The toxins secreted and poured into the system produce certain symptoms common to all infectious diseases, as chill or fever with rapid pulse, headache and restlessness, acting upon the heart and nervous system.

AUTO-INTOXICATION, a condition occurring quite frequently, is caused by the presence in the circulation of toxins, ptomaines and the products of decay and disintegration which act on the heart and nervous system. A disease is epidemic when starting from a few persons it spreads rapidly throughout the community until it is checked or loses its virulence. It is said to be endemic when confined to a certain locality showing no disposition to spread beyond its boundaries. At times endemic diseases "flare up" and become more active and virulent, overspreading their natural boundaries, become epidemic.



## HYGIENE.

**MEDICAL HYGIENE** consists essentially in the *prevention of disease by the removal of its avoidable causes*. It embraces various influences operating upon the physical condition of individuals and communities, either by promoting their material good, or by preventing their deterioration. It has, therefore, for its object, the preservation of health, by means which contribute to the most perfect development of the body, and which are best calculated to render Life more vigorous, decay less rapid, and Death more distant.

While our observations on Hygiene are necessarily fragmentary and restricted, they are still very important, and their adoption by those who refer to these pages cannot fail to be fraught with advantage. The rudiments of Medical Hygiene should be taught and rendered attractive in schools, until, as a result of the education of the masses, a solid groundwork is laid for the promotion of the Public Health. By means of this general education, as well as by the help of the public press, and popular medical works, the general knowledge of the causes of disease may be so augmented, as to prevent much existing suffering, and to diminish unnecessary waste of human life.

The importance of this science of Medical Hygiene will be appreciated when we state that it embraces, among

others, the following subjects, all of which have direct and indubitable relation to Health and Life, viz:

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|----------------|------------------------|
| I. FOOD.       | V. SUNLIGHT.           |
| II. BEVERAGES. | VI. HEALTHY DWELLINGS. |
| III. WATER.    | VII. EXERCISE.         |
| IV. AIR.       | VIII. CLOTHING.        |
| IX. BATHING.   |                        |

## X. THE INFLUENCE OF OCCUPATION UPON HEALTH.

### FOOD.

1. *The circumstances regulating its use.*
2. *The Nutritious Values of different kinds of Food.*
3. *The methods of preparing it.*

For what do we require food? For two chief purposes, viz.—to produce and maintain the various tissues of the body while fulfilling their respective vital functions; and, to generate heat, without which life would cease. For these ends different forms of food are required. This has been very happily illustrated by a comparison between the steam-engine and the human body. Just as, in a steam-engine (1) the metal framework and (2) the coals which heat the water into steam which sets the metal machine into motion; so there are, in the body, (1) the tissues and (2) the fuel. The bony framework, the skeleton, is moved by muscles, which in turn are set in action by the nerves. These correspond to the metallic portions of the engine, which are not themselves consumed, but wear out and need repair. The fuel of the body, like that of the steam-engine, is hydrocarbonaceous; i. e., it consists of hydrogen and carbon, which

readily unite with oxygen. And, like the coals or fuel which, though inanimate, still gives motion to the engine; so the Vegetable World, practically without motion, yet stores up the material which renders motion in animals possible. For, while animals, as the result of the combustion of their food, produce carbonic acid gas; vegetables deoxidize, or eliminate, this carbonic acid—which is very necessary for their own life—and store up carbonaceous material, and give off free oxygen, upon a supply of of which animal life is absolutely dependent. Thus the Vegetable and the Animal Worlds live side by side; each necessary to the other. The Animal could exert no force without oxygen, which he obtains from the Vegetable world; the Vegetable would perish without carbonic acid which is produced for it by the Animal World.

Then, again, just as the plant takes the carbonic acid, and returns an equivalent in oxygen—so it, also, takes from water a supply of hydrogen, and gives back a supply of oxygen.

Thus, from these two—CARBON and HYDROGEN—are built up *starch, sugar* and *fat*—the hydro-carbonaceous elements which essentially constitute our food—the equivalent of the coal in the steam-engine.

Now, as to the tissues of the body—which correspond to the metal framework and working-parts of the steam engine—they all contain an essential element known as *nitrogen*. And nitrogen has this peculiarity, that, when combined with carbon and hydrogen, they do not as readily combine with oxygen, as they would do if nitrogen was absent. It is due to this quality of nitrogen, that the tissues

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of the body, being themselves nitrogenized, are not consumed by the heat of oxidizing processes going on within them. The metal-work of the engine is not consumed by fire from the oxidizing coal; and, in a state of health, the tissues of the body are not consumed by the heat produced by the oxidizing hydro-carbonaceous food.

It is well that the reader should grasp this broad law fully; for this division of foods is the basis of all that we know about what a dietary should consist of. It should contain hydro-carbonaceous material for the working of the body; and a sufficiency of nitrogenized material for the growth and repair of the tissues. Besides this, *phosphorus*, for the nervous system, *iron* for the blood, *hydrochloric acid* for the gastric juice; and *alkalies* for the liver, are requisite in limited quantities. From the *salt* (Chloride of Sodium) of our food we get at once the flavoring agent acceptable to the palate; and the *hydrochloric acid* for the gastric juice, and the *soda* for the formation of bile-salt in the liver. For health, various salts, of *potash*, *soda* and *lime* are needed, which are furnished in the different articles of our dietary—and, without which we should seriously suffer in health, as, for example, in scurvy, caused by a deprivation of vegetables, and cured by vegetable diet with magic celerity. In addition to the foregoing, also, we must not overlook *spices* and *condiments* which, aside from being agreeable to the palate, serve to excite and sustain the appetite and prevent too much disengagement of gas in the alimentary canal during the process of digestion and assimilation. Such are the chief constituents of our food.

It is interesting, now, to see, what becomes of these

different elements of food, in the process of digestion—and to what uses they are severally put by the body. Hydro-carbons are quickly disposed of; a certain surplusage being stored up, in the form of *fat*, on which the body can live in times of starvation; and the average amount of this garnered store is found to be equal to about ten days' combustion—or, in other words, the body can—if deprived of food—live upon itself for ten days. *Starch*, by the action of the saliva and pancreas ("sweet-bread") juice, is converted into sugar; and is stored up, in the liver, from each meal, as *glycogen*, which is given off again from the liver, gradually, as the body requires it, and is oxidized, or burnt to maintain the heat of the body, and to generate force. *Starch*, *sugar* and *fat*, then, as we have before said are the *hydro-carbonaceous* elements of our food.

In addition to these, must be remembered also, the *nitrogenized*, or albuminoid elements of food—equally requisite for tissue growth and repair; and also producing in their oxidization a certain amount of heat. Albumen—a complex substance chemically—contains carbon, hydrogen, some oxygen, and its essential characteristic *nitrogen*, with a little sulphur—and is largely found in the Vegetable World. All seeds contain it. The white of all eggs (birds, reptiles or fishes) is very pure albumen. It is found, as *caseine*, in milk, cheese and the leguminous plants; and as the muscular portions of the animal body, the viscera and skin: and when swallowed, is digested mainly in the stomach, and passes into the blood, from whence it reach the tissues. The nitrogen-element of albuminoids, however, prevents their ready oxidization. Their waste and surplusage is burnt up by the

liver—the results being the bile acids, and the solids (lithates and urea) of the urine. Now if the liver does its work well—all goes well—; but, if it oxidizes, or burns, these albuminoids insufficiently, then the blood becomes sur-charged with bile-salts; and biliousness and gout result. Therefore it is, that, in the treatment of these diseases, the patient should be restricted in the use of the albuminoid elements of food, to the lowest point consistent with tissue-wants. For, with a large number of persons, it is a matter of the greatest importance to avoid these albuminous elements in their food. Moreover, the amount of albuminoid matter required for the repair of the tissues of the body, to meet its daily wear and tear, is really very small. Physiologists assure us that it does not call for anything like the amount of meat which is usually consumed by most persons. Where the system has been much reduced by acute disease, as in fever, a liberal dietary is required for rebuilding the tissues—the appetite is then ravenous and the digestion good. Just as children, while rapidly growing, require a dietary in which meat forms a large part; so the convalescent from fever must have a diet list rich in albuminoids, in order to repair the wasted frame. But, aside from these exceptions, our food is rich in albuminoids beyond our absolute wants—a fact to be borne in mind in the choice of food, either for those in health or in disease.

Health may even be restored by the use of proper food, as sickness is often induced from the want of it. While it is impossible to specify for each individual case; yet general principles may be laid down; and indications given for the kinds of food best adapted to the several classes mentioned.

Each period of life has its most appropriate food, so has each season of the year and each habit of constitution or body, and that which is proper for one is often quite improper, and sometimes even injurious to another. The distinction is based upon chemico-vital wants of the system, at different periods of life, and under varying or varied conditions of the living body. To be more particular:

SUPPLEMENTARY DIET OF INFANTS.—The best and most natural food is the milk of the mother. Even if this only in part supplies the want of the child, it is better to retain it, as in case of sickness of the infant, it furnishes a precious reserve to be supplied in no other way. *Cows' milk* is the most usual substitute, and should at first be diluted by adding one-third of water, and slightly sweetened. If milk is to remain some time during warm weather, it should be first heated to prevent too rapid change. Great care should be taken that the nursing bottle be *perfectly clean* and sweet; and food which has been standing, or is in danger of having been deteriorated, must on no account be given. Better make that which you know to be sweet and fresh, than to assume a risk. After some weeks the milk may be given without water, and as the first teeth appear, about the fourth or sixth month, the diet should become more varied and liberal; a well made panada, diluted milk, sweetened and thickened with a small quantity of arrow-root, sago or rusk, may be given with advantage. So barley-water, well-boiled gruel, weak chicken-tea or beef-tea, may be resorted to, taking care to give that on which the child seems to thrive best. Gradually, as the teeth appear, the child may be given the usual food from the table, in such

quantities, and in such form, as the organism seems to require.

THE FOOD OF YOUNG CHILDREN should contain all the elements, out of which the entire system is to be developed. There must be material for making every separate tissue of the entire man, and that in a condition to be as readily assimilated as possible. Milk from the cow meets all these conditions, having in itself all the elements required for the human body, and in their best proportions and condition. To this may be added barley, in its various forms, as of gruel, or in pap or cakes, in proportion to its age and development of teeth, the soup or flesh of beef or mutton. If the child is fat, heavy or stupid, it requires food containing more nitrates and phosphates—oat-meal, barley cakes, bean or pea soup, etc. If too lean and thin, it may be indulged in the more fattening carbonates, as fat meat, fine flour, butter, sugar, or puddings, etc. Thus the food may be varied as the needs of the child demand.

FOOD FOR LABORING MEN should in part be adapted to the nature of their labor, and to the season or temperature. But in general, as there is a large expenditure of muscular effort, the supply should be equal to the drain. Hence, beef, mutton, a proportion of pork, with vegetables, bread, butter, ale or beer and cider, coffee and tea, all come in play and serve to restore the waste of tissue, and sustain the vigor of the body.

PROFESSIONAL MEN, THINKERS AND STUDENTS, whose expenditure is chiefly of the brain, and whose bodily activity is necessarily limited, require such a supply of nutriment as will measurably compensate for this waste. Hence, only a

moderate supply of beef, mutton, lamb, ale or beer, but a larger proportion of fish, venison, wild or tame fowl, oysters, fruits, nuts, raisins or figs; and of the fish, trout, blue-fish, Spanish mackerel, or other game fish, are best; oat-meal in its various forms, wheaten grits, and coarse wheat bread, should form the staple of diet.

FOOD FOR FAT, CORPULENT PEOPLE.—In many families the tendency to corpulence and even obesity is constant. To many individuals it is the bane and dread of life. Yet such persons often use a diet directly tending to induce and aggravate the evil, while a proper diet always limits, and often removes the entire difficulty; for adipose tissue is only produced by certain fat-making articles of food. If these be avoided, the system may at the same time be nourished, and this accumulation of fat be prevented. The thanks of the world are due to MR. BANTING, an English gentleman, for having so clearly and forcibly elucidated this point in his pamphlet\* on the subject, to which I refer those more particularly interested. I have had occasion to verify his observations in repeated instances. The fat-making articles are particularly butter, sugar, pork, milk, bread, potatoes, all sweet fruits, etc. Hence, the patient may eat all kinds of meat except pork—all kinds of fish except salmon, all the fruits except those containing sugar in large proportion, and nearly all kinds of vegetables except potatoes. Now, by choosing a diet containing largely the articles allowed, and only a very little of well-baked or toasted bread or potatoes, to which sour wine and tea and coffee may be

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\* BANTING, on Corpulency.



added in moderation, and no butter, milk, or sugar, the most corpulent may reduce their weight several pounds per month, while improving their general health, strength and mental vigor. And this may be continued to any reasonable limit.

VERY LEAN, SPARE PEOPLE, by pursuing the opposite course, may increase their weight and embonpoint as well as their comfort. They should use sugar, milk, butter, bread, potatoes, pork, fat meat, oysters and fruits, figs, grapes and fish. These heat and fat-producing elements will, unless the assimilation be very faulty, soon produce a change for the better, which may be extended at the pleasure of the individual.

IN COLD WEATHER, when people are exposed to low temperatures, the more fat and heat-producing articles are required. Of these, pork, buckwheat, Indian corn, wheat-bread, butter, milk, sugar, beer or ale, beans, peas, meat, poultry, etc., are among the more prominent.

IN WARM WEATHER the more cooling, less heat-producing articles are appropriate. The quantity of meat of any kind should be moderate, and that principally the lean of beef, lamb, veal or poultry, and well-ripened fruits of all kinds, and of vegetables in their seasons, with a due proportion of well-baked wheaten bread. Cooling drinks, acidulated with fruits, are in order and are very grateful and healthy. I am convinced that a far more liberal use of fruits, in their seasons, would largely conduce to the health and welfare of our people.

THE DIET OF THE AGED should suit their individual condition. If fat, heavy and sleepy, inclined to sit and slumber,



let them avoid fat meats, butter, sugar and fat-creating elements of food; and, instead, eat of lean meat, brown bread, fish, nuts, vegetables and fruits, with the usual quantities of tea or coffee. *Butter-milk* is one of the most desirable articles of habitual food for old people, as it prevents the transformation of the cartilaginous tissue, which enters into the formation of tendons, arteries, etc.—into bone, thus largely relieving the stiffness to which old age is liable, as well as ameliorating its infirmities in other ways.

On the contrary, if they are lean, irritable, querulous or sleepless, let them eat of fat meat, bread and butter, buckwheat cakes, rice, milk, butter-milk, potatoes, etc., and the better nourishment of the system will manifest itself in improved sleep and disposition.

## 2. *The nutritive values of different kinds of food.*

In discussing this subject, we have to take into consideration not only the absolute *amount of nutrition* to be found in such kind of food; but, also, its *ease of mastication* and of *digestion*; and its *flavor*, which has so great an influence in determining its use, either in health, or in cases of illness.

**ANIMAL FOOD.** The structure of animal food is identical with that of the human body; hence nothing is required in addition to it in order to maintain life. Its chief characteristic, i. e. its large proportion of nitrogenous material has been already noticed on page 37. Undue importance is given by some persons to animal food, as if that alone really nourished the system, and supplied what is required for work and recovery of strength. No doubt it

appeases ~~and~~ <sup>is</sup> more thoroughly than vegetable diet, and satisfies longer, because it is concentrated nourishment, and the stomach retains this kind of food for a longer time than vegetable food. It is also easily cooked, and by some is more easily digested than vegetable; it increases the amount of fibrin, phosphates and other salts, and the number of red corpuscles in the blood; it produces firmness of muscle, it increases the urinary secretion both in quantity and in amount of effete nitrogenous matter, thus necessitating the consumption of an increased quantity of fluid. *Vegetable* food has a tendency to increase the deposition of fat. Mr. Banting found that by lessening the amount of vegetable diet he was enabled to reduce his corpulence. Physiological considerations and experience teach us that *a mixed diet is best adapted to the requirements of the body*; and that the proportion of animal food should be one-fourth, or rather more, of the total supply.

Animal food comprises: 1. the different parts of animals, i e. meat; 2. eggs; 3. milk and its products.

The flesh of young animals is more tender than that of old, but it is not so easily digested. The flesh of old animals, though nutritive, is often very tough. Young and quickly-fed animals have more water and fat in their flesh, whilst older and well-fed animals have flesh of a firmer touch and fuller flavor, and are richer in nitrogen. The former may be more delicate, the latter are more nutritious; animals of middle age, therefore, afford the most digestible and fullest flavored food. The larger the animal, the coarser the meat. The flesh of the female is more finely grained and delicate than that of the male.

During the breeding season flesh is unsuitable for food. The flesh of wild animals has less fat than that of well-fed domestic animals, but it has more flavor. The character and flavor of the meat are much affected by the food eaten. The violent exercise taken before death makes the flesh of animals killed in the chase very tender. The removal of blood in slaughter, while it involves waste of nutritive material, improves the flavor of the flesh, and renders it more easy of preservation. Hanging the meat improves its tenderness, if it be kept after the *rigor mortis* has passed away. But the best meat may be rendered unwholesome by decomposition.

Good meat, according to Dr. Letheby, has the following characteristics:—

1. It is neither of a pale pink color nor of a deep purple tint; for the former is a sign of disease, and the latter indicates that the animal has not been slaughtered, but had died with the blood in it, or had suffered from acute fever.

2. It has a marbled appearance, from the ramifications of little veins of fat among the muscles.

3. It should be firm and elastic to the touch, and should scarcely moisten the fingers—bad meat being wet, and sodden, and flabby, with the fat looking like jelly or wet parchment.

4. It should have little or no odor, and the odor should not be disagreeable, for diseased meat has a sickly, cadaverous smell, and sometimes a smell of physic. This is very apparent when the meat is chopped up and drenched with warm water.

5. It should not liquefy or become very wet on standing for a day or so, but should, on the contrary, remain dry upon the surface.

6. When dried at a temperature of  $212^{\circ}$  or thereabout, it should not lose more than from seventy to seventy-four per cent of its weight, whereas bad meat will often lose as much as eighty per cent.

7. It should not shrink or waste much in cooking.

And, in determining the values of different kinds of meat, it is essential to distinguish between fat and lean, since the nutritive elements of both, in a given joint or whole animal, will be proportionate to the combination of fat and lean.

It may be well to state here the respective elements of fat and lean meat. *Fat*, deprived of water, consists of three elements only, viz: carbon, oxygen and hydrogen. When the fat is decomposed in the body these elements unite so that the carbon takes a part of the oxygen and becomes carbonic acid, whilst the hydrogen takes another portion of the oxygen and becomes water—any deficiency in the quantity of oxygen for this purpose being supplied by the inspired air.

*Lean meat*, entirely deprived of fat, consists of four elements, viz: nitrogen, carbon, oxygen, and hydrogen. Besides the combination of the three latter elements (as already described in reference to fat) the nitrogen unites with the hydrogen in the formation of urea, and other compounds, which are thrown out of the system, by means of the kidneys, etc., and ultimately are transformed into ammonia.

Heat being generated by every chemical combination, it is evident that both fat and lean meat are heat-generators—but as it is the lean meat which contains nitrogen, it is the lean meat and not the fat, which is the flesh-former. Still we cannot say that no fat is found in lean meat even, for a

proportion of fat moving in the circulation must enter into and pass through the tissues of muscles, as of other parts of the body.

BEEF is popularly regarded, all the world over, as the most nutritive kind of meat—and this is in so far true that in the carcass of the ox there is a larger proportion of flesh or flesh-forming materials than in that of the sheep or hog. Being of closer texture than some other meats, there is—if bulk be the measure,—more nutritive value in a given quantity of beef. It is also the fullest of red-blood juices, so that Byron, seeing Moore eating an underdone beef-steak, asked if he were not afraid of committing murder after such a meal. Mareschal's analysis (in 100 parts) conclusively shows this:

	Ox	Fowl	Pig	Sheep	Calf
Muscular fibre free from fat	25.0	24.9	24.3	23.4	22.7
Fat.....	2.5	1.4	6.0	3.0	2.9
Water.....	72.5	73.7	69.7	73.7	74.4

The flavor of beef, moreover, is fuller and richer than that of other meats, so that a greater enjoyment, and sense of satisfaction is obtained from a less volume of that kind of flesh.

The loss of weight in cooking beef is less than that of mutton, by reason of the greater solidity of the flesh and the smaller proportion of fat. The solid matter derived from a pound of meat without bone, boiled in the usual way, will average, (per cent) 28.4 on lean, 57.6 on fat beef, and 34.3 on mutton.

The legs and shins are richer in gelatin than any other joint of the body, whilst the largest proportion of oily fat, or of fat having the least degree of consistence, is found in

the flesh of the face. Hence, both of these parts are especially fitted for the making of soup.

Ten grains of raw lean beef, when burnt in the body, produce heat sufficient to raise 3.66 lbs. of water one degree, Fah., which is equal to raising 2.829 lbs. one foot high.

Dr. Beaumont's experiments proved that the digestion of beef requires  $2\frac{3}{4}$  to 3 hours.

In many cases of illness, if properly cooked, it may be eaten with impunity; but in Enteric fever, and other diseases where the bowels are inflamed and tender, it produces, in its ordinary form, either as steak or as a cut from a joint, injurious effects. Even in the form of beef-tea it often increases the irritation, keeps up the fever, and aggravates the diarrhoea; consequently in such cases it should, for the most part, be excluded from the diet list. As beef requires considerable effort on the part of the stomach to convert it into chyme, it is contra-indicated in acute maladies until convalescence has commenced, when by allowing the patient to extract the juice at first, and then swallow a few shreds of the meat, daily increasing the amount swallowed, the digestive organs will be finally won back to their normal condition and capability. Nevertheless, there is a form, in which beef has been most beneficial. Administered in a raw state, when finely divided and reduced to a pulp, it is very useful in some derangements of the stomach. Although not very palatable at first, a taste for it is soon acquired. In this form it has proved very valuable in Cholera infantum and Dysentery, when everything else failed. It should be prepared by scraping with a (silver) spoon, and seasoning with a little salt.



**VEAL.** The delicacy, nutritive value and digestibility of calf's flesh depends very much upon the age at which the animal is killed, and the method of killing adopted. Veal is popularly known to be difficult of digestion, which fact is due to the difficulty of masticating it; not that its fibre is harder, but because it eludes the teeth. It is much easier of mastication when well-roasted or broiled, than when boiled, and when very young and well-fed; but it is not, after all said in its favor—a meat to be frequently indulged in. The time required for its digestion is about the same as for pork, and may extend to 5 hours, or more.

Veal-broth is generally prepared from the fleshy part of the knuckle. It is not very palatable; and as it does not contain the nutritious qualities of beef-tea or mutton-broth, it is scarcely advisable to introduce it into the sick-room, except for the sake of occasional variety. The lean of a lamb chop cut from the loin is often a morsel which tempts the flagging appetite.

The bones of the calf at the early period of life contain but little earthy matter, and therefore yield a larger proportion of gelatine, etc., while the flavor of the juice is very delicate, and almost entirely free from fat. Hence the reason for selecting calves' feet for the making of jelly and the value of this kind of food to invalids. The "sweet-bread" (pancreas) of the calf is the most expensive part of any ruminating animal ordinarily eaten by man, far more so than its nutritive value or even its flavor warrants; but, after all, it is—whether boiled or fried—undoubtedly the most delicately flavored meat in use.

**MUTTON**, is popularly and correctly regarded as a lighter



food than beef, and it has doubtless a more delicate flavor, less red-blood juices, a looser texture, and a larger proportion of fat. Although an agreeable and valuable food, it is not so well fitted as beef to sustain great exertion, but is rather adapted to those of sedentary habits, and quiet lives, including women and the sick. The actor Kean, who had a fancy of adapting the meat which he ate to the part which he was about to play, selected mutton for lovers, beef for murderers, and pork for tyrants.

Mutton or mutton-broth is much to be preferred for delicate persons. Mutton-broth has less nutritive value than the broth of beef, but having a delicate flavor it is preferred by many persons. It is, however, too rich in fat to be easily digested, unless a large portion of that substance be first removed. Lean mutton, then, should be selected for making broth; the scrag of the neck is a suitable joint. When a patient is so far convalescent as to require solids, a mutton chop, properly cooked, is generally most suitable. Broiling should be preferred to frying, and to cook mutton chops nicely a clear fire is absolutely necessary. The chops should be sprinkled with salt and pepper, and placed over the fire for six or seven minutes. They should not be pricked, but should be frequently turned to insure their being thoroughly cooked.

The most solid and leanest meat of the sheep is the leg; and the least solid and fattest portions are the loins, neck and breast. The loss on cooking mutton is greater than that on beef—but this varies much with the breed, and with the food of the sheep, being least when they are fed on cake or dry food.

Mutton requires from 3 to  $3\frac{3}{4}$  hours for its digestion.

LAMB, like mutton, varies in its nutritive, chemical and digestive qualities, in proportion to its age, breed and feeding. Its meat is deficient in strength; though it may be of more delicate flavor; it possesses more water and less nitrogenous matter. The time required for its digestion is less than that of the flesh of a grown sheep—viz,  $2\frac{1}{2}$  hours.

PORK differs from beef and mutton, not in flavor only, but in the larger proportion of fat to lean flesh—and, owing to this great preponderance of fat, cannot be regarded as equal to beef or mutton in nourishing the system of those who make much muscular exertion. The greater hardness of its muscular fibre, also, renders its mastication so difficult that much of it is apt to be swallowed in pieces too large for immediate solution in the juices of the stomach. This is particularly true of those persons who habitually chew quickly, or have defective masticating powers, or who are careless in performing the act of mastication—classes embracing the old, and the young, and no inconsiderable proportion of those of intermediate ages.

Five and a quarter hours is required for the digestion of roast pork (varying materially with the proportion of fat and lean, the age, breeding and condition of the pig, etc.)—but young pickled pork will probably be digested in about 3 hours.

There is, however, a greater danger in the use of pork than of any other kind of meat, since, so far as is known, it is more frequently diseased—and the nature of the disease is such as to be very injurious to man. “Measly” pork is known to have produced fatal results to those who have in-

cautiously eaten it, and although the characteristics of the disease may be recognized by those who understand it, they are neither known to, nor observed by the great majority of the poorer classes. The terrible pest of the small *Trichina spiralis* worm, which penetrates the whole muscular system—upwards of 50,000 having been computed to the square inch in the flesh of those who had died from eating the pork which harbored it—causing great suffering and death, is another possibility which needs to be kept in mind by the lovers of pork. This diseased state may not be evident to the naked eye, so that, as a *precaution*, all pork should be well cooked. The instances of the disease which have occurred, have almost uniformly been after eating uncooked sausages, or ham—a habit not confined to Germany.

The loss on cooking American pork is estimated at 50 per cent, whilst on Dutch and Irish pork it is from 25 to 30 per cent; the difference being due to the nature of the animals' food in the respective countries.

BACON (that is, the sides of the pig which have been prepared by the removal of some of the lean flesh and ribs, and preserved by means of salt and salpetre) and HAM are not without a certain nutritious value, and require less time than pork, for their digestion, according to their degrees and cooking. Three hours will suffice for their digestion. They occupy an exceptional position in relation to fat and cured meats. Fat bacon, taken with any substances that are rich in nitrogen, is very nourishing. It increases the nutritive value of eggs, poultry, peas, and beans.

VENISON is lean, dark-colored, and savory, having more the character of game than of butcher's meat. It is very

easily digested, and is therefore suitable to the dyspeptic and convalescent; its rich flavor may, however, constitute an objection to it, and if it has been kept too long before being cooked, it is very apt to produce diarrhœa.

The OFFAL of animals, such as the skin, feet, tail, horns, head; lungs, liver, spleen, omentum, pancreas and heart, intestines and other internal organs, (forming, generally  $\frac{1}{3}$  of the weight of animals killed for food, and not sold for meat)—still furnishes much good, nutritious alimentation for man. It possesses a greater proportion of the nitrogenous elements than the carcass, (though in a less nutritious form than in flesh, since it largely consists of gelatine and chondrine); but less of fat.

The *Skin*, so far as it is useful as food, is consumed in the form of gelatine, and is probably the greatest source of that article. *Gelatine*, which forms the basis of soup, is the nitrogenous principle of bones. They contain a considerable quantity of nutritive matter; but for its extraction they should be broken into small pieces and boiled for many hours, if possible in a "digester." Although investigators have found that gelatine fails to nourish animals when given by itself, it is now a well-established fact that in combination with other substances it can be turned to account in the system as a force-producing element, thus acting as a protein compound. In the form of jelly, with or without wine, when not tough, it is readily digested, and serves to allay the feeling of emptiness and hunger when more nutritious food cannot be well taken. Being demulcent, and possessing no irritating qualities, it proves very useful in inflammatory affections of the bowels. As it is soothing

and grateful it may be allowed where diarrhœa is not to be feared. In the preparation of gelatine jelly it is very essential to soak the gelatine, as procured in the shops, in cold water for some time.

The *tongue* of all animals used as food is in request and regarded as a delicacy. Fat or lean, and eaten hot or cold, it forms a most agreeable food. *Sheep's head* boiled or grilled, among the poorer classes; *calves' head*, among the richer, have each their value; while *ox head* (having about 30 per cent of rich meat and some solid fat) is much used as meat and in the form of soup—a convenient dish for the poor man's family, since it yields good and cheap soup for the children, while the adults eat the solid meat. The *pig's head* gives a much greater proportion of meat to bone than in the heads of other animals, because the pig lays up much fat about the jaws. The *liver* of the pig is a favorite dish with the poor; that of lamb, calf, or Strasburgh goose (*pale-de-fois-gras*) by the rich, and, although not equal to flesh as a food, furnishes a considerable proportion of nutritive elements. It is not, however, suitable for those whose digestive powers are feeble. The liver of all animals is said to be infected by a parasite, which, however, is sufficiently evident to the naked eye, to be avoided—as it may be by cutting it in slices, examining it carefully and seeing that it is thoroughly cooked—frying being the best method. The *lungs*, or as they are vulgarly termed “lights”, are eaten as a part of the “pluck”, or “fry” (omentum, pancreas and heart); and being composed almost exclusively of membranes and vessels, contain a high proportion of albumen and other nitrogenous matter. They are not, however, very easily

masticated or digested, and should be well cleaned, and any diseased portions removed. The *omentum* (consisting partly of membranes and vessels and partly of fat) is an agreeable addition to the otherwise lean fry. That from an old animal is not so tender or so readily masticated as from a young one, and it is desirable to masticate it well. A part of it is eaten as *tripe*. The *pancreas* (which, with the thyroid and sublingual glands, passes by the name of “sweetbread”) commands a very high price; contains a considerable proportion of water and some fat, and has a delicious flavor when properly prepared. That of the calf is the most esteemed, though that of the lamb is not infrequently substituted for it.

The *intestines* are used as food by man in the preparation of sausages and “black puddings”, and as *tripe*. Tripe is prepared from the stomach and intestines, with the fatty structures attached thereto, of the ox and cow, and consists of two parts, viz. the walls of those organs and the enclosed fat. It is prepared simply by thoroughly cleansing the organs from every adherent substance, and from the flavors of bile, or other disagreeable matters, and then gently boiling them in clean water for about an hour. When thus prepared, it is of somewhat delicate flavor, and very easy of mastication and digestion. Its chemical constitution is such that it affords considerable nutriment, though not very satisfying—for it fully digests in about one hour—leaving the stomach in need of a new supply of food. Its nitrogenous compounds, also, being those rather of gelatine than of albumen, are somewhat less valuable than might be expected. Though the ease and rapidity with which it is



digested seem to indicate it as a proper food for the sick; yet, in practice, its absence of pronounced flavor, and, perhaps, the unusual nature of the food, prevents its selection by the sick generally.

From the *feet* of animals, we get two chief chemical elements of food—oil and gelatine; hence we have neat's-foot oil and calf's-foot jelly. *Pigs'* feet, Dr. Beaumont found to be digested in about one hour—and cow-heels would probably require the same time, except such tendinous parts as are masticated with difficulty and may be only partially digested after the lapse of several hours. "Collared pork", made from the gelatinous parts of the pig—such as ears, face and feet, was in use in the 14th Century.

*Sausages* are of two kinds, those made from fresh meat, and those made from preserved meat, and both are placed in pieces of intestine. The first named, composed of meat, bread and condiments, if made of proper kind, quality and quantity of meat, and used while fresh, are agreeable and valuable food.

Those made of preserved meat, and designed to be kept for use, have a much greater nutritive value than fresh sausages, since the meat is very dry; they are composed of meat only; and, in the average, they are equal to 3 times their weight of fresh meat—and are particularly adapted to the use of travellers, soldiers and laborers who cannot cook their meat. The Prussian sausage (which obtained a very wide use during the recent war with France) consisted of a mixture of bacon, pea-flour, onions, salt and condiments—the pea-flour being a patented preparation which did not sour. The daily ration per man was 1 lb., and it



only required boiling in water for a short time before eating.

*Black puddings*, prepared with blood (chiefly of pigs) to which groats and various herbs, with lumps of fat, are added,—the whole enclosed in a piece of pig's intestine and boiled—is, in some parts, gaining ground in large communities, where the frequency of slaughtering animals renders its daily preparation possible. They usually receive an additional cooking, before eating, by being fried, with or without being previously warmed by immersion in hot water. They should not be kept too long. Blood contains so many valuable nutritive elements as to render it, as a food, only inferior to the flesh, which is made from it\* and

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\* Composition of fresh blood in 1000 parts:

Water	-	-	-	-	-	-	-	779.00
Fibrin	-	-	-	-	-	-	-	2.20
Fatty matter	-	-	-	-	-	-	-	1.60
Serolin	-	-	-	-	-	-	-	0.02
Phosphorised fat	-	-	-	-	-	-	-	0.49
Cholesterin	-	-	-	-	-	-	-	0.09
Saponified fat	-	-	-	-	-	-	-	1.00
Albumen	-	-	-	-	-	-	-	69.40
Blood corpuscles	-	-	-	-	-	-	-	141.10
Extractive matters and Salts	-	-	-	-	-	-	-	6.80
Chloride of sodium	-	-	-	-	-	-	-	3.10
Other soluble salts	-	-	-	-	-	-	-	2.50
Earthy phosphates	-	-	-	-	-	-	-	0.33
Iron	-	-	-	-	-	-	-	0.57
Also sugar								

The salts in blood perform an important part in *nutrition*, and it may be well to indicate their nature in the pig, sheep and ox, whose blood is used as food. The following is the quantity, per cent, of each salt:

	Pig	Sheep	Ox.
Phosphoric Acid	36.5	14.8	14.04
Alkalies	49.8	55.79	60.
Alkaline Earths	3.8	4.87	3.64
Mineral Acids and } Oxide of Iron	9.9	24.54	22.32

any fear of diseased germs existing in it, may be set aside by the consideration that a temperature at and above 212°, if fully applied, will destroy all known elements of disease; and that blood, when fresh and so cooked, may be eaten with perfect safety.

In the discussion of meat food we are led to consider the subject of *Extracts of Meat* and *Fluid Meats*, of which many varieties are in the market, and extensively used in the sick room. They are prepared (in two forms, viz. in a thick semi-fluid state, and as solids) by boiling down the flesh of animals, so that 32 lbs. of flesh are said to be required to prepare one pound of Liebig's Extract. Lean cattle being necessarily selected for this purpose—and the net flesh (lean meat) weight of the animal being averaged at 300 lbs., one animal only yields about 10 lbs. of the extract. During this process, all the fat and as much of the gelatine and albumen as can be extracted, are removed from the solution of flesh, whilst the fibrin, being insoluble, is necessarily left behind. Hence there remain water, salts, osmazome, the flavoring matters and the salts of meat—thus leaving out all that is popularly regarded as nutritious. It is evident, therefore, that but little is left in the beef extract to nourish the body; and the elements which it really possesses are salts which may be otherwise obtained at an infinitely less cost, and the flavor of the meat which disguises the real poverty of the extract. A good deal of that which is sold as extract is only solidified soup, with gelatine added. Good extract is slightly acid, of pale yellowish-brown color, with an agreeable meat-like odor.

Beef-tea Extract then, is a stimulant rather than a food.

A person may be hungered to death on it—and, if relied upon as a principal article of food for the sick, it will prove a broken staff, except to those extremely feeble persons who can take very little food, and are favorably influenced by very slight causes. Liebig himself has stated that “it is not nutriment in the ordinary sense.” In the preparation of ordinary soup and beef-tea, it may be added to the stock to increase the flavor, or it may be mixed with white of egg, gelatine, bread and other cooked farinaceous substances, or with a teaspoonful of cream. But it should be remembered that it is properly to be classed with such nervous stimulants as tea and coffee, which supply little or no nutriment, yet modify assimilation and nutrition. Used alone for beef-tea it is a delusion.

The solid preparations of meat, contain a considerable proportion of gelatine and do not putrefy because the gelatine has been dried. A much larger quantity of these solids than of the semi-fluid extracts, must be used, to obtain the same amount of meat-flavor and salts—but, in the same ratio, is the gelatine (nutriment) increased. In as much as they represent different qualities and uses, the solid and the semi-fluid extract preparations of meat may both be used together with advantage.—The solid foods are made, also, from the meat of other animals than the beef, and therefore offer a variety and delicacy of flavor to the invalid, which the extracts do not.

There are in the market, also, *fluid preparations* (such as Stephen Daily's) of lean meat, which retain the fibrin, gelatine and coagulable albumen—made by a process as nearly as possible representing the natural process of

digestion in the stomach, and by which one pound of fluid meat is obtained from 4 lbs. of lean flesh. Assuming that all the nitrogenous elements, as well as the salts, are properly retained by it, it should prove a superior article of food to either the fluid extracts, or the solid preparation of meat.

ALBUMEN, (familiarily represented by the white of the egg) is, by far, the most important single element of food, inasmuch as it contains nutritive matter in a compact and easily digestible form; and being almost without flavor, can be used in the preparation of food, very diverse in other respects, while it is adapted to every variety of taste. Its composition, in the egg, is identical with that contained in the blood and tissues of man and animals—and it has been demonstrated that ten grains of solid albumen, when burned, produce heat sufficient to raise 12.85 lbs. of water 1° Fahr., which is equal to lifting 9.920 lbs. to a height of one foot.

GELATINE, differing from albumen in appearance, is similar in chemical composition. It is found in the tendons, skin and bones of the body, in the stomach of the sturgeon, in the juices of plants, in seaweed, moss, and birds' nests, etc.—is almost destitute of flavor, and requires wine, &c., to render it palatable. Its flavor, readiness of mastication and digestion, and nutritive elements, make it for food almost as valuable as albumen.

Eggs. The almost entirely albuminoid character of eggs, renders them a most valuable article of diet. Indeed, if the shell be included, an egg contains everything that is necessary for the formation and maintenance of the body. It is popularly supposed that an egg in the raw state is

more easily digested than one that is cooked, but this may be doubted, if the egg be not overcooked.

It has been found that the yolk is more digestible when hard-boiled, while the white is least so. If the albumen be coagulated by the heat of cooking it becomes heavy and difficult of digestion, and sometimes produces constipation and irritation of the bowels. It should therefore be particularly avoided by dyspeptics, and by persons recovering from illness, before the full powers of digestion have been regained. If the insoluble portions of hard-boiled eggs are delayed in the stomach and intestines, they putrify, and the sulphuretted hydrogen and ammonia evolved become irritating to the intestinal canal. But fresh uncooked eggs are almost wholly free from these objections. A fresh raw egg, thoroughly stirred into about half a pint of milk, forms, to most persons, a palatable and nourishing article of diet. One great advantage this preparation has over other food is that all the component parts are retained in their natural state, are more completely dissolved, and consequently make less demands upon weak digestive powers, than when the egg is eaten in its solidified form. If patients object to the taste of raw eggs, a little sugar may be added; or if this be not sufficient, some simple flavoring extract may be used. Wine or spirits are often employed, but they are usually objectionable, and should be dispensed with if possible.

Eggs seem to be particularly useful in lung diseases, and in cases of exhaustive cough soothe the irritable mucous membrane.

*Artificial fibrin*, so called, has been found available when no other food could be taken. It is thus prepared:—The

white of an egg is poured into cold water and allowed to remain for twelve or more hours, during which time it undergoes a chemical change, becoming solid and insoluble, assuming an opaque, snow-white appearance. This and the liquid in which it is immersed are heated to the boiling-point, and the fibrin is ready for use. It is very easy to digest, and to many is quite a delicacy. It is said that the stomach will retain this in many cases when everything else is promptly rejected, its presence creating a craving for more food, and thus promoting instead of diminishing digestion.

Egg, with milk and sugar, forms a plain custard, which is often allowable and very grateful.

The mixture of egg with milk, is very nutritious—but, if the milk be new and good, it is possible that such a combination might hinder rather than promote digestion and nutrition. In the cooked form of pudding, egg and milk are more digestible.

Eggs undergo change by being kept. The porous shell allows the evaporation of water and the infiltration of air; certain organic changes also occur when the shell is rendered non-porous. To test the freshness of an egg an ounce of salt may be added to ten ounces or half a pint of water; in this solution a fresh egg will just sink, one that has been kept for several days will float. A bad egg is often sufficiently light to float in pure water. Fresh eggs may also be known by holding them up to the light, when they will appear clear; if stale they will appear cloudy. Fresh eggs are most translucent in the centre, stale ones at the end. In order to preserve the freshness of eggs various



plans have been adopted to render the shells non-porous or to exclude air; such as boiling them for half a minute, keeping them in lime water, bran or salt, or covering them with a coating of wax, oil, butter, gum, or varnish; but with only variable success. No fusty egg is good for food, even when put into puddings; it should be banished from the house if there be the slightest smell of old straw about it.

*Ducks' eggs* are larger and have a stronger flavor than hens' eggs; the solid matter and the oil in a duck's egg exceeds that of a hen's by as much as one-fourth. They are not often introduced into the sick-room, but there is no reason why they should be excluded if the flavor be agreeable to the patient.

The *poached* egg, as prepared in France, Mexico, and Eastern lands, is very delicious. A pottery dish is used instead of an iron pan, and the heat kept moderate by using charcoal fires. The dish is very thick, so that it must be placed upon the fire for a little time to become well warmed through, after which butter, with pepper and salt are placed in it, by which the surface is well lubricated and a savory mixture prepared to receive the egg, which is then broken and dropped into it, and in a short time turned so that both sides may be slightly browned, but without breaking the yelk bag. When cooked it is served on the same dish and in the hottest state possible and its flavor is very delicate—being often appetizing to the invalid when, in other forms of cooking, it would be rejected.

Egg takes about as long as mutton to digest—viz., 3 to 4 hours. Its chemical composition is (per cent), dry matter



30.0; mineral matter 1.4; dry fat 11.0; nitrogen 2.0; carbon 17.52; or carbon and nitrogen reckoned as carbon 20.56.

**POULTRY AND GAME.** The flesh of birds differs from that of animals, in the relative quantity of fat; and, in the quality of juices. The fat of birds is laid up in various parts of the interior of the body as well as under the skin, but is very sparingly formed in the fibres or the juices of the flesh; and its flavor is not regarded as agreeable. The juices are deficient in red-blood. The flesh of fowl is quite as rich in nitrogenous elements, but relatively poorer in fat and salts than that of animals—and is regarded as light food, better suited to invalids than to strong men or as an adjunct to flesh rather than as a food to sustain man.

In the flesh of fowl, there are very appreciable differences, dependant upon the nature, breed, food and feeding of the bird. The flavor of wild birds is fuller and stronger than that of domesticated birds, and the flesh richer in nitrogenous, as it is generally poorer in carbonaceous material. The structure is closer and firmer, and in the fresh state hard and tough, so that wild fowl are always better after being kept a while, to allow of the beginning of separation and softening of the fibres, through decomposition. Hence, while a domestic fowl is eaten when quite fresh, a wild fowl is kept many days, or for weeks, before it is cooked. Sexless birds, as the capon and pullet, grow larger, fatten better, and are more tender and delicate than ordinary poultry. *Ducks* and *geese* are not so well adapted as poultry for the sick room, for their flesh is harder, richer, and more highly flavored.

*Pigeon* and smaller birds are usually tender and relishing, and may be eaten with safety by the convalescent.

The blood of the common fowl is inferior to that of red-blooded animals in the matter of the salts of iron, but superior to it in phosphates, (said to play so important a part in regenerating the nervous tissue) which are three times more abundant in the latter than the former. The average chemical composition of poultry-flesh, when fat for the market, in 100 parts, is, water 74; nitrogenous 21; fat 3.8; salts 1.2.

*Rabbits'* flesh in general and nutritive character closely assembles that of the hen, and its delicate flavor and digestibility render it more acceptable to the invalid than that of the *hare*, which is food rather for the healthy than the sick. Hanging the hare's flesh for a considerable time before cooking, improves its flavor, ease of mastication and digestion. The flesh of the *squirrel* is very dense, gelatinous, luscious and satisfying.

FISH is an exceedingly valuable food, if eaten as soon as possible after capture. The popular belief in its lack of nutritive value arises probably from the fact that it does not easily satisfy hunger, and is quickly digested, so that the appetite soon returns. Nor is it desirable that fish should form the sole, or even the greater part, of nitrogenous animal food eaten by any people; for, even should milk and eggs be added to it, the vigor of such a people will not be equal to that of flesh-eating peoples. At the same time, the value of fish as a part of a dietary is indicated by the larger proportion of phosphorus which it contains, and which renders it especially fitted for the use of those who perform

much brain work, or who are the victims of nervous exhaustion or of much mental anxiety and distress.

Fish are out of condition in the spawning season, and are then less fit, or even unfit, for food; young fish can always be eaten. Fish caught from the deep seas are better than those from shallow bays; and fresh water fish from deep, clear water with stony bottom, than those from muddy shallows. As with animals, whether beast or bird, domestic or wild, their quality depends upon feed, its kind and quantity, etc.

A sign of the freshness of fish is its firmness and rigidity, which is due to the *rigor mortis*, which passes off after awhile. For the invalid, fish should always be *boiled*, or *broiled in oil*; the fat added in *frying* it renders it less digestible. Dried, salted, smoked or pickled fish should not be offered to invalids; but a little fresh fish, well boiled, served with bread and butter, without sauces and seasonings, may frequently tempt the fastidious appetite.

For food purposes, we are accustomed to divide fish into two classes—viz., into white-blooded and red-blooded, of which cod represents the former, and salmon the latter. The flavor varies, also, in proportion to the amount of oil in the flesh of the respective kinds of fish—white fish containing, as a rule, far less oil than red fish. The nutritive value of white fish, is much less than that of the flesh of animals; less than that of poultry, but greater than that of eggs; but the nutritive value of the flesh of a red-blood fish (salmon, for instance), is almost equal to that of the flesh of other red-blood animals. Fresh herring offers the largest amount of nutriment, for a given sum of money, of

any kind of animal food, and is therefore pre-eminently, "the poor man's fish."

*Salmon* stands pre-eminent as a delicacy, and more nearly resembles the meat of animals than that of other fish; fat is intermixed with the muscular fibre, and underlies the skin, particularly of the abdomen; it is therefore rich—too rich for invalids. *Mackerel*, *Herring*, *Bullhead*, and *Eel* are also fatty in their composition; and, therefore, less suitable than white fish for those whose powers of digestion are feeble.

Amongst white fish are *Shad*, *Halibut*, *Brook-Trout*, *Pike*, *Perch*, *Bass*, *Sunfish*, *Haddock*, *Flounder*, *Cod*, etc., whose flesh contains little fat, except in the liver. *Whitefish*, the chicken of fish, is the most delicate and easy of digestion. *Cod* is close, firm, tough, and indigestible for a weak stomach. Fried *Cod* is like veal cutlet, but drier. *Halibut* has richer flavor, but does not stand high as food for invalids.

Fish-broth contains nearly the same component parts as meat-broth, and in some countries fish-soups are as much esteemed as those of meat.

*Isinglass*, which is obtained from the air-bladder of the sturgeon, is a useful vehicle for the administration of other ingredients of food, surpassing gelatine in value.

SHELL-FISH, with the exception of oysters, are less nutritive than other kinds of fish, less digestible, and more likely to disagree with weak stomachs than most kinds of animal food. In some persons they produce gastric irritation and diarrhoea, and in others nettle-rash and similar eruptions. Indeed, so marked is this effect on some constitutions, that it is necessary to forbid shell-fish altogether.

*Lobster* and *Crab*, though very agreeable to many persons, are not suitable for those whose digestive organs are weak, and consequently should not be introduced into the sick-room. Indeed, some persons in ordinary health cannot take them, because they are not easily digested, even when stimulants of the gastric juice are added in the form of vinegar and pepper. *Turtle-soup*, and *clam-soup* though somewhat rich, when given in small quantities at a time, are often very restorative to invalids.

*Oysters* are nutritious, and readily digested even by delicate stomachs. From recent researches it appears that they contain sufficient pepsine to be self-digestive. By invalids they should be taken without the fringe or beard (gills), and without the hard muscle by which the fish is attached to the shell; they should also be taken *raw*, and masticated before they are swallowed. To eat them with vinegar is to commit a dietetic mistake. It is a good plan to keep them alive for a day or two by placing them in a shallow dish of clear brine, feeding them with meal and changing the water, so that they may lie bare for a while, and then be washed again twice a day, in imitation of the tide. They are in best condition from September to May. As a means of conveying phosphates they are invaluable.

Fresh oysters are most grateful in chronic dyspepsia; where nausea is present; in the case of consumptives; for the trouble of morning sickness; in chronic diarrhœa; they can be eaten with advantage by the nursing mother, who will in this way not only strengthen her own system, but also that of the child at her breast. Convalescents from fever will find in the oyster a delicate and nourishing food.

*Oyster-stew*, prepared plain or with milk; or oyster-essence made by slowly simmering oysters in their liquor or a little water until they swell, seasoning with salt, straining the liquor, and serving with dry toast or plain biscuits, are excellent methods of giving oysters.

**MILK.**—Pure milk contains in solution, like eggs, all the elements required for the growth and sustenance of the body. This is especially true in relation to a child. Indeed, it may be regarded as the typical alimentary substance, for it combines nitrogenous, fatty, saccharine, and mineral matters, and water, in such proportions as are required by the animal economy, and in such a state of mixture and liquefaction as to be easily assimilated. In fact, it requires no digestion, and it is this excellence which renders milk a most important and convenient article under many circumstances. It is already digested and prepared for absorption. In cases of fever, pure milk as the main article of diet is far superior to anything else, especially in Enteric and other fevers, with derangement of the stomach and bowels. Beef-tea, which is commonly used, is often irritating; but milk, on the contrary, is soothing, cooling, and at the same time nourishing and strengthening. In chronic disorders of the stomach and bowels a milk diet is a most valuable accessory to medical treatment. It allows the stomach to have almost absolute rest, which in many cases is the main thing required. And this condition can be prolonged almost indefinitely, since an adult can be sustained for days or even weeks on milk alone. It should, however, be observed that milk would not be suitable diet for adults in health, as the nitrogenous matter is in considerable excess



in relation to the carbonaceous. It is suited to young persons who have to grow, and who in order to grow must appropriate an excess of what is nitrogenous to form a daily addition to the body. On the other hand, it is not so suitable for full-grown persons, who have not so much to form tissue as to develop heat, or other force, by the combustion of carbon.

It must not be overlooked that the several elements or constituents of milk vary in quantity and proportion in different animals, and under different circumstances in the same animal. Variations are exhibited in the following table, which should be regarded as showing average rather than actual proportions, inasmuch as the milk of each animal is not alike.

	Woman	Cow	Goat	Sheep	Ass	Mare.
Nitrogenous matter and insoluble salts	3.35	4.55	4.50	7.00	1.70	1.62
Butter.....	3.34	3.70	4.10	6.50	1.40	0.20
Lactine and soluble salts.....	3.77	5.35	5.80	4.50	6.40	8.75
Water.....	89.54	86.40	85.60	82.00	90.50	89.43
	100.00	100.00	100.00	100.00	100.00	100.00

The "nitrogenous matter" is chiefly caseine, which forms curd and cheese; the "lactine" is a form of sugar.

Woman's milk is, of course, the standard. Cow's milk more nearly approximates to it than that of any other animal, and hence is most generally used; contains considerably more caseine, less sugar and a little more butter than woman's milk. If therefore a mixture be made of  $\frac{2}{3}$  cow's milk and  $\frac{1}{3}$  of warm water, to which half an ounce of sugar of milk be added to the pint, we shall obtain a composition



very similar to that of the mother's milk. If sugar of milk be not obtainable, its place may be supplied by somewhat more than half the quantity of refined cane sugar. Goat's milk is richer than cow's; sheep's milk still richer. Ass's or mare's milk is much poorer, but much sweeter. Indeed, so large is the proportion of sugar of milk in the last that it is fermented and converted into a spirituous liquor, known by the name of *koumiss*, and successfully administered in many cases of Consumption, chronic Bronchitis, and chronic Diarrhœa.

*Koumiss*, which is fermented mare's or cow's milk, has been found very useful in some cases of consumption. The Russian plan of making it is as follows:—Two teacupfuls of wheat-flour are mixed with one spoonful of honey, one of good beer yeast, and sufficient milk to form a not too thin paste; the whole is put in a moderately warm place to ferment. When fermentation takes place the ferment is put in a linen bag, and hung in a jar or keg containing sixteen pounds of fresh mare's milk, covered and allowed to stand till the milk has acquired a pleasant, acidulous taste (about 16 to 24 hours, according to the temperature). The butter and cheese particles which float about are now skimmed off, the liquid is poured into another keg and shaken for one hour, after which time it is poured into bottles, corked, and put into the cellar. A "cure" requires twelve to fifteen pounds of milk daily, the produce of two mares; the best season for it is from May to July. The *koumiss* is taken early in the morning, every hour (a teacupful to a tumblerful at a time), and plenty of exercise must follow.

Cow's milk varies very much in quality. After parturition

takes place in any animal the first fluid secreted differs considerably from ordinary milk, and is termed *colostrum*; consequently cow's milk, for three or four weeks after calving, is not fit for food; it has a somewhat sickly smell, and acts as a purgative.

The milk of the Alderney cow is characterized by its richness in butter, that of the long-horns by its richness in caseine. The product of young cows is preferable to that of old ones, and as a food for infants the age of the secretion should be less than that of the baby; that is to say a cow with a calf two months old may do very well to feed a child of four months. The milk first drawn from the cow contains less cream than that which is last drawn; indeed (especially if some time has elapsed between the time of milking), the amount of cream in the latter may be two or three times as much as in the former. The milk of the afternoon is richer both in caseine and butter than that of the morning. The food on which the cow is fed considerably affects the quality of the milk; poor diet impoverishes it; strong vegetables, such as turnips, cabbages, and onions, flavor it; decayed leaves make it disagreeable; poisonous plants render it injurious; nothing is equal to the fresh pasture of country fields for securing good milk.

Its quality may be tested by the amount of cream it produces, by its weight, and by its specific gravity. The larger the proportion of cream, the better the milk. A quart of new milk, cooled, should weight about 2 lb. 2¼ oz. if it is of fair average quality. The sp. gr. of good genuine milk ranges from 1.026 to 1.030 at a temperature of 60°. The addition of water or an excess of cream lowers the sp. gr.

But whether or not the milk be diluted with water, it is not unfrequently rendered unwholesome by being put into vessels that have not been cleansed by thorough washing out with soda. On stale milk, even in minute quantities, a small blue fungus, or mould, very speedily forms, which soon spreads to fresh milk and causes it to turn sour; hence Colic, Diarrhoea, and Thrush are occasioned in those who partake of it.

Fifteen grains of bicarbonate of soda to a quart of milk prevents it from turning sour, and also renders it more digestible.

Milk, though nourishing, does not agree with every one. If diluted with one-third lime-water, it will rarely cause biliousness or indigestion, and if taken regularly will so strengthen the system as to banish these disorders. It may be taken with acid of some kind when it does not easily digest. The idea that milk must not be eaten with pickles is not an intelligent one, as milk curdles as soon as it is swallowed. When milk is constipating a little salt sprinkled in each glassful will avert the difficulty. When it has an opposite effect, a few drops of brandy in each tumbler of milk will obviate purgation. After finishing a meal a tumbler of pure milk may be drunk, and half a pint taken at bedtime with a biscuit makes a light supper. Ten grains of new milk when consumed in the body produces sufficient heat to raise 1.7 lb. of water 10 F., which is equal to lifting 1.246 lbs. one foot high.

The milk of all animals is more easily digested when eaten warm, especially by those who have the impression that it does not agree with them, and by invalids. This is not,

however, due to any marked chemical change effected in the milk by heat, for the only effect is to coagulate the albumen and to raise it as a scum upon the surface, but to the stimulating effect of heat, both on the palate and stomach. In cases of fever, in exhausted conditions dependent on loss of blood, and in summer diarrhoea and other inflammatory affections of the alimentary tract, it may be given scalded with excellent results; it is a sheet-anchor in Enteric fever. Owing to outbreaks of fever which were traced to infected milk, many persons adopted the precaution of boiling all milk before using it, and thus the disease-germs which it may have contained were rendered innocuous. This is a good plan for persons resident in towns. But when used as a substitute for mother's milk, cow's milk should not be boiled, but only raised to the temperature of breast milk by the addition of warm water.

*Cream* is composed of the fatty constituent of milk, which, on account of its lightness, rises to the surface when the milk is allowed to stand. It forms the basis of butter. It can often be taken freely when nothing else will remain on the stomach, notwithstanding the abundance of fatty matter. It should always be fresh, and may be diluted with water or given pure if desired. *Clotted cream* is produced by heating milk just to the point of simmering, which causes a scum to form with the fatty matter and give it more consistence.

*Skim-milk* is that from which the cream has been removed, and being consequently less rich than ordinary milk, it can frequently be taken by invalids when the latter cannot.

*Butter-milk* is what is left after the extraction of butter. It of course contains less fatty matter than skim-milk, but it retains the nitrogenous, saccharine, and saline matter, and is therefore very nourishing and useful as an article of diet. Unless very fresh it is generally a little acid. It is one of the most refreshing summer drinks that can be taken, and is almost always allowable in sickness, especially in fevers with gastric symptoms. It arouses a gentle activity of the liver and kidneys, particularly of the latter organs; and is (See page 45) especially valuable for old people.

*Curds* are the caseine and fat of milk combined by coagulation of the milk. They form the basis of cheese. The addition of an acid to the milk sets free the caseine which is held in solution by an alkali, and causes coagulation.

*Whey* is the residuary liquid after the curd has been removed, containing a little of the caseine and fat, but all the sugar, acids, and salts of milk. The caseine and fat being absent, there is no fear of curdling in the stomach, thus causing pain or Diarrhœa. Whey can, therefore, be taken by many persons with whom milk disagrees. It is not very valuable as nutriment, but it is very digestible, is easily absorbed, and is a refreshing drink in the sick-room especially in inflammatory disorders. A slight flavor of nutmeg makes it very palatable. There is a prevailing opinion that whey is sudorific; hence wine-whey, alum-whey, tamarind-whey, etc., when the milk has been curdled by these substances, are recommended. The method of preparation is given in a succeeding chapter.

In Switzerland whey is supposed to have medicinal

virtues, particularly for the relief of chronic disorders of the abdominal organs; the treatment, which is known as the *Molken-Kur*, has a fashionable reputation.

*Condensed milk* is milk preserved by the evaporation of a large proportion of its water, and the addition of cane sugar. It is sold in hermetically-sealed tins, in which it can be kept for several years; when the tins are opened it is found in the form of syrup, which will remain good for several days. It is very useful for the diet of invalids in making of light puddings, or other food into which milk largely enters. It requires the addition of a considerable quantity of soft water (three parts water to one part milk) to replace what has been evaporated. Being already sweetened, it needs no addition of sugar. Its sweetness renders it very agreeable to infants, who take it readily, grow plump, and apparently thrive well upon it.

But it is an error to assume that a given quantity, when dissolved in water, will yield new milk or be as useful as new milk in feeding infants and young children, and it should rarely be used as a substitute in such cases when new milk can be obtained.

**BUTTER** is the fatty portion of milk, obtained by churning the cream or the entire milk. This operation causes the rupture of the envelopes of the fat globules, which then coalesce and become incorporated into a solid mass. Milk yields on an average  $5\frac{1}{2}$  per cent. of butter. Though butter is generally churned from cream, it would be produced in greater quantity from entire milk; but as the churning of milk would necessitate more labor and the use of larger vessels, it has not been generally adopted.



The churning of cream is best performed at a temperature varying from 50° to 55°, and the temperature may be regulated by placing hot or cold water, according to the season, in the outer vessel. Milk requires a temperature of 60°. When the butter is formed it should be kneaded and washed with water to remove the caseine, fatty acids, and other ingredients which would prevent its keeping sweet and fresh. Salt is added to preserve it. If syrup be added instead of salt, or sugar with which is mixed a little salt, butter is said to keep better.

When pure and fresh, butter is more easily assimilated by delicate stomachs than most other fats. It is also the form of separate fat which is less frequently disliked by consumptive people and invalids generally; but it should not be too bountifully supplied. Butter that has become stale or rancid, or been exposed to heat (as for buttered toast), is very likely to disagree with dyspeptics and other invalids, and cause Diarrhœa. Indeed, as a rule, all kinds of decomposing fats disagree with the stomach. There are ready means of detection through the senses of sight, taste, and smell, when butter is adulterated. Pure butter should be of a uniform rich yellow appearance; when a streaky look is imparted by quickly passing over it a clean knife the presence of adulterants is always to be suspected. When melted it should yield a clear-looking oil, with but slight deposit of water or other substances. When placed on the tongue it melts quickly and leaves the tongue perfectly smooth; while, on the contrary, there will be a sense of roughness, a granular taste, and the peculiar flavor of the adulterant, as the result of this test, when butter is adulter-



ated. The odor of butter is very persistent, and therefore does not so well mark its purity or the reverse.

The value of CHEESE as an article of diet has not been entirely established. If we consider its chemical composition we find it very rich, richer than any other known food, in (nitrogenous) nutritive elements, provided we select a good specimen: but this varies with the conditions of its manufacture. The poorer the cheese the greater the proportion of the casein\* (curd) or nitrogenous element; while the richer the cheese the greater is the proportion of fat or butter which it contains; but, in either case, the proportion of nitrogenous matter in a given weight far exceeds that of meat. One pound of cheese has been estimated as equivalent to  $3\frac{1}{2}$  lbs. of lean beef. Taken with bread or other vegetable diet it is very nutritive to persons of active habits; and, as a relish, or condiment it stimulates digestion. There is, however, a long-standing belief that cheese is not easily digested; and also, that in spite of this want of digestibility, it promotes the digestion of other foods. Scientific experiment has, indeed, shown that there is good reason to consider both of these beliefs as well founded; and that, while it may be proper to eat a small portion of cheese, both for the nutrition which it supplies and for the promotion of digestion, it is not proper to eat a large quantity, or to make it a principal article of food and a substitute for meat. It is not at all improbable that cheese may produce different effects on different persons; that its effect will

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\* This is the sole source of the nitrogen in which cheese so abounds, and when pure consists of the following elements in 100 parts: Carbon 53.83; Oxygen 22.52; Hydrogen 7.15; Nitrogen 15.65.

bear some relation to the desire which the individual has for it; and that its customary use from childhood may modify its appreciable deleterious effects.

The time required for its digestion varies with its age and according to the amount of fat it contains, but—with a fairly good medium-aged cheese, is from  $3\frac{1}{2}$  to 4 hours. New cheese and poor cheese also require a longer time for digestion, since they are chewed with greater difficulty. Old poor cheese also requires a longer time, for its hardness delays its solution in the gastric juices; and, if a good cheese be old and greatly decayed it plays the part of an irritant in the stomach which may cause a form of indigestion, and be itself hurried through the stomach into the intestines so rapidly as almost to prevent its digestion.

*Toasted cheese*, as ordinarily prepared, is one of the most indigestible articles that can be eaten, but if it is new and lightly cooked with cream and butter, it can be rendered digestible by a *healthy* stomach.

Ten grains of good cheese when consumed in the body produce sufficient heat to raise 11.2 lbs. of water 10 Fahr., which is equal to lifting 8.649 lbs. one foot high.

*Cream cheese* (fresh curd moderately pressed) must be eaten fresh; and is more digestible than ordinary cheese (2 to 3 hours) because it is softer, more easily masticated and has less casein. To many invalids it will prove a pleasant variation with other diet.

*Dripping*, from roasting joints, if not burned, is one of the most nutritious forms of fat and very agreeable; its flavor depending somewhat upon the degree of roasting to which the flesh is subjected. It may sometimes prove a welcome

alternative to butter in the sickroom. Salt should be eaten with it; but it must be taken in moderation, and its action watched, or it will disorder the stomach and heighten fever.

VEGETABLE products enter largely into the food of man, in the form of seeds, roots, leaves, herbs, and preparations of different kinds.

Farinaceous seeds form the largest portion of our vegetable food, and are the most extensively used; they are of great nutritive value, of easy digestion, plentifully yielded, and universally grown.

*Cereals* hold the first place. Their general composition is very similar, but on account of the differences that exist in the proportions of their component elements they have different nutritive values. Even the various kinds of wheat are not exactly alike, especially in the relative proportions of nitrogenous matter and starch. On an average, wheat contains more nitrogenous matter than other grains. Oats come nearest to wheat in this respect, and are of equal value to many wheats; they also contain a large proportion of fats and salts. Maize (Indian Corn) is rich in fatty matter, moderately so in nitrogenous, but poor in salts. Rice is very rich in starch, but poor in other constituents.

The constituents of *Wheat* more nearly correspond with the requirements of the human system under ordinary circumstances than any other grain; and life and health can be maintained on wheat alone for an indefinite period, provided there be an adequate supply of good water and air. Hence it is one of the most widely cultivated of the cereals.

As ordinarily used, however, it is deprived of much of its nutritive value, for the portion which contains the largest amount of nitrogenous matter is removed in order to meet the demand for *whiteness* in the bread. Each grain, after being thrashed out of the straw and winnowed from the husks, is composed of a hard, thin outer coat, or bran; a soft, friable intermediate layer of cells; and a central white substance chiefly composed of starch. The outer coat is woody, indigestible, useless for nutrition, and irritating to the alimentary canal. In some cases it may therefore be advisable to retain it to act mechanically to stimulate the action of the intestines in constipation; but when used by persons who take active exercise it is too stimulating, for it causes the food to pass hurriedly through the canal before the process of disintegration and assimilation is completed. For invalids, and persons whose digestive organs are in a state of susceptibility, it is too irritating. The inner coat is of most value. It is usually removed with the outer coat in dressing the flour. But it is the richest part of the grain in nitrogenous matter, fats, and salts, the part which contains food for muscles, bones, and brains; and the more thoroughly this is removed, the finer the flour is dressed, the whiter the bread produced, the less valuable is the bread for nutrition. The central white material of the grain is chiefly composed of starch, but it comprises also a proportion of the more nourishing elements, though the proportion is so small that the utility of the grain is sacrificed to the appearance of the bread. Many writers—notably Liebig—have pointed out the waste of nutritive material, and the unwisdom of preferring white bread to that which

contains the nitrogenous portion. Pavy, however, reminds us that bread is not our only food; that what is rejected in the bread is taken in other forms; and that through animal diet we receive the very elements which have been eliminated from the flour. Certainly, to most persons, the white bread is more palatable, and has a more attractive appearance, than the more nutritious bread; but the taste is probably a matter of habit. If it were not that it gave a dark color and a soft consistence to bread, a very important soluble nitrogenous matter called *cerealine* might be utilised by soaking the bran in warm water for some time, and using the water in the preparation of the dough for bread. It would be better to sacrifice the appearance and cultivate another taste, if thereby more nutriment could be obtained. Young and growing children are great but unconscious sufferers from the common custom. Many are weak from mal-nutrition, grow up with defective teeth and bones, weak tissues, inadequate muscular development, and are susceptible to diseases which they have not constitutional strength enough to combat and resist.

*Stale bread* is preferable to new, especially in any weakness of the digestive organs, since it is firm and more friable under the action of the teeth, and more easily penetrated by the digestive juices, than new bread. New bread in the stomach often ferments afresh, and even in persons of good digestion produces heartburn.

The *toasting of bread* greatly increases its digestibility, provided it be properly done. The slice should be toasted brown, not burnt, so that it may be crisp and firm throughout. It then constitutes *the best form in which starchy food*

can be given; for much of the starch is changed into glucose by the heat; and in wheat bread there is some little gluten, which partly supplies the place of albumen. If toast is buttered, the butter should be applied as the toast is eaten, so that it may not become soaked with the butter. By some it is much enjoyed without butter, and is then more readily digested. *Toast-water*, when properly prepared, forms an almost indispensable article in the sick-room. If good, stale bread or biscuits are nicely toasted, not burnt, and then placed in a dish or pitcher, and hot water poured on and allowed to cool, the drink may, while more nourishing, be more palatable than water alone.

*Biscuits* which contain but little water, are, bulk for bulk, more nutritious than bread, three quarters of a pound being about equal to a pound of bread. *Wheaten biscuits*, either sweet or plain, are most suitable for those who suffer from Dyspepsia and Constipation.

*Sponge cakes* are also light, and often tempting. They may be soaked in hot milk; as also may *rusks*. *Muffins* are very indigestible. *Gingerbread*, when dry, crisp, and light, is acceptable to many dyspeptics. *Macaroni* and *Vermicelli* are very nutritious, but not easily digested.

*Oats*, when ground, form a flour which is not so white as wheaten flour, and when made into bread has a peculiar taste, half sweet, half bitter. Unlike the wheat, the muscle-making material of the oat is not connected with its hull, and is not therefore removed in making fine flour. Oat-meal and unbolted wheat-meal contain about the same amount of heat-producing material, but one pint of oat-meal-gruel contains as much muscle-making material as



five gills of unbolted meal gruel, or as in three quarts of fine flour-gruel. The Scotch oatmeal is generally preferred for flavor and nutritive qualities. *Porridge* is a hasty pudding of boiled oatmeal. The oatmeal should be mixed, at first very thin, in boiling water or milk; while boiling, the meal should be sprinkled slowly on the surface and stirred in; when enough is added, the whole should simmer for half an hour or longer, with an occasional stir. If, however, the oatmeal be imperfectly boiled, as when prepared in haste, it is extremely indigestible, and produces obstinate pyrosis and flatulence; but if well boiled, and eaten slowly so as to become thoroughly mixed with saliva, it is most wholesome. *Oat-meal Gruel* is a similar preparation, in a more liquid form. It should be boiled until every particle of the meal is cooked. It may be made with milk instead of water; or part water and part milk, and is generally better if strained, as the straining removes the irritating husks of the grain.

Oatmeal in all its forms is somewhat laxative, and often causes irritation of the bowels, especially if not sufficiently cooked. There are some persons who cannot take it on account of the acidity and eructation which it causes.

*Barley*, though less employed than formerly in the form of bread, is peculiarly rich in phosphates (more than twice the amount contained in meat); and, as it is also stimulant and laxative to the bowels, might be made useful to literary men of sedative habits, who need an increased action both of bowels and of brain. Such persons might use it either in the form of cakes, or porridge. *Barley-water*, made from pearl barley, forms a slightly nutritive, bland, and de-



mulcent drink for invalids. It is made by taking about two ounces of pearl barley which has been well washed in cold water, and boiling it in a pint and a half of water for half an hour.

*Rye*, next to wheat, especially for bread-making, is the best of the cereals; containing more of the heat-producing, but less of the muscle and brain-feeding elements than wheat. As it contains more waste materials than wheat, it is more stimulating or laxative to the bowels, and therefore may be useful in constipation.

*Buckwheat* is inferior to wheat in nutritive elements, but is an excellent heater; and eaten, as it is generally and extensively, in the form of cakes for breakfast, with ham, sausage, beefsteak, or fish, it serves to keep up the heat for a winter's day. An eminent judge of the U. S. Supreme Court used to say that a breakfast of buckwheat-cakes, enabled him to do a longer and better day's-work, than anything else. It is a favorite breakfast food all over the United States.

*Indian Corn* is not adapted for the manufacture of bread on account of its deficiency in gluten, unless wheat or rye flour be mixed with it. *Corn meal* is very nutritious, more fattening and containing a larger proportion of oily material than wheat, with greater production of animal heat. Made in the form of bread or cakes either wet up with water, milk, or with the addition of suet or molasses, it forms a hearty nutritious and healthy food, which is extensively used and prized in every part of our country; and, indeed, in some parts, forms the main staple of vegetable diet.

*Hominy*, which is the grain cracked into two or three

pieces, is excellent food, especially if made from southern corn; and, as it contains a full share of muscle-making material, is peculiarly adapted to laboring men. Its large proportion of life-essentials, also adapts it to those who follow sedentary and literary occupations. The "small hominy", of New England, is generally made from the flint corn; and containing less of muscle and brain-food, and more of the heaters, is best for use in cold weather. *Hulled corn*, also, has all the elements of the corn, except those contained in the hull; and, the oil being removed by being soaked in some alkali, is very excellent for summer use.

*Green corn*, or "corn in the milk," boiled in fair water in the ear, is a nutritious delicacy and though quite laxative is widely used and prized by all classes of the people. Grated from the cob and made into a batter with milk, and fried, it forms the most delicious of cakes.

*Rice* is said to be the food of nearly one-third of the human race. The best comes from the Carolinas. It is useful as an article of diet, whether whole or ground into flour; but its deficiency in the muscle, brain and nerve-supporting elements, and its preponderance of starch, renders it one of the poorest of foods for promoting mental or muscular strength. One pound of beans would support life, *in action*, as long as four pounds of rice. It, therefore, requires the addition of some fat to make up for its deficiency in this ingredient. It should be thoroughly cooked, whether the grains be ground or remain whole. Boiled, or baked with milk and eggs, as rice-pudding, it forms a substantial meal, and is especially suitable

for invalids, as it does not make great demand on the digestive powers. Rice boiled five or six hours forms, on cooling, and after the water has been strained off, a jelly which is soluble in warm milk, and makes a pleasant change of diet. *Rice-water* is made by washing an ounce of good rice in cold water, then macerating it for three hours in a quart of water kept at a tepid heat, and afterwards boiling it slowly for an hour. It is very useful as a drink in all irritable states of the alimentary tract, as in Dysentery and Diarrhœa; and, for young infants, and children suffering from Diarrhœa, Indigestion, Constipation, Flatulence, Atrophy, or Aphthæ, *corn flour* and similar preparations are very unsuitable. In all cases, foods which contain traces of bran, and also gluten, gum, sugar, cellulose, and saline matter, especially the phosphates, in proportion to the starch, are to be preferred.

*Beans* are rich in nutritive materials, and well adapted to strong healthy persons with good digestive powers. Two pounds of beans will enable one to do more muscular work than three of wheat, and more brain-work than three and a half. But, as they are deficient in heating powers, they are best eaten with fat pork, or some other heat-making food. They are also eaten green, when the starch is not formed; but as, in that state, they lack the nutritious element, they require butter or some other heat-giving material. *French Beans* and *Scarlet Runners* are eaten with the pods before they are ripe. In Europe the seeds of the dwarf bean are allowed to ripen, and, when stripped from the pods, are sold as *haricot beans*. *Small White Beans* boiled and then baked with salt pork, form the celebrated "Boston

Baked Beans," so widely known and justly prized by all New England people. *Peas*, contain very nearly the same elements, in the same proportions, as beans, but are more easily digested. Young, green peas, without their pods, are very delicate and nutritious. Old peas should be treated as dried peas—soaked, stewed, and crushed—if they are to be rendered palatable and digestible. Dried peas, split peas, without skins, if well boiled, are excellent food for healthy persons.

NUTS.—*Walnuts*, *Filberts*, *Almonds*, *Pecan-nuts*, *Peanuts*, *Butternuts*, etc., are of value as relishes to be eaten after a meal. They contain a large proportion of oil and so may be rather too heavy for persons of weak digestion; but are of value for the phosphates which they so largely contain. They should be taken in moderation, at a time when the stomach has had some rest and can employ its powers for their digestion; they should be thoroughly masticated, so that the saliva may act freely throughout the mass; they may then be taken by those whose digestion is good, but should be avoided by invalids. They are, to some persons, more enjoyable if used with a trifle of salt. *Chestnuts* are more indigestible and can rarely be eaten without having been roasted, or boiled, or made into a flour and baked. *Almonds* are of two kinds. The *bitter* almond contains elements which, when brought into contact with water, develops poisonous products, and consequently when employed for flavouring puddings, cakes, and liqueurs, has proved injurious, and even fatal. The *sweet* almond is innocuous; but on account of its irritating qualities the skin should be removed, by soaking the nut in warm water;

and, if the nut be baked for a little while it may be easily broken and pulverised, and thus rendered more digestible.

*Starch*, as an article of diet, is useful in the formation of fat and force; but is devoid of nitrogen. It has this recommendation, that it allays the sense of emptiness and hunger when other food cannot be taken. But its granules are covered with a hard envelope which renders them difficult of digestion; and if they be eaten uncooked they pass through the canal without yielding up their nutritive properties. If, boiled, the envelopes are ruptured, and the contents are easily transformed, either by the saliva or the intestinal juices, into sugar, and are thus easily assimilated. All preparations of starch should therefore be cooked before they are eaten, by stirring them into boiling water or boiling milk, and then letting them simmer for a few minutes. If prepared with milk instead of water, wine should not be added.

*Sago*, prepared from the pith of a species of palm, is useful for thickening soups, and making light puddings, which with the addition of milk form a light and easily digested diet for the invalid. *Tapioca*, prepared from the root of the cassava, is similarly employed and similarly useful. *Tapioca jelly* is an allowable and pleasant dish. The tapioca should be soaked in cold water for several hours, and then cooked until perfectly clear, adding more water if necessary. When done, sweeten to taste, and flavor with lemon, or wine; and when cold eat plain or with cream. *Arrowroot* possesses little nutritive value and little sustaining power; its chief merit is that it is bland and easily taken; but some other

alimentary substance should be added to it. The true arrowroots (Bermuda, Jamaica, and West Indian) are to be preferred for the sick-room, for they will often remain on the stomach of an invalid when the others will be rejected.

We come now to a class of vegetable products containing a large proportion of water, which makes them succulent; of these the potato takes the lead in importance and dietetic value.

*Potatoes* are an agreeable and wholesome article of food, easily cultivated, kept, and cooked, not always easily digested. They also have the recommendation of being anti-scorbutic. In this quality cabbages take the first place, and all succulent vegetables share, but potatoes have been proved repeatedly to produce a most beneficial effect in the prevention and cure of scurvy.

The proportion of starchy constituents is large, and of nitrogenous elements small, so that it is desirable to eat with them some other food to supply the deficiency in nitrogen; such as meat, fish, bacon, buttermilk, etc., in order that a fully nutritious diet may be supplied. When cooked, the heat employed coagulates the albumen, the starch granules absorb the watery particles, swell, and burst their cells, and thus the mass is broken down into a loose, floury, or mealy condition. If, however, the absorption is incomplete, and the rupture of cells imperfect, the mass remains coherent, firm, and waxy. In the former state the potato may be easily digested; in the latter it is difficult of digestion. Young potatoes being close and firm are very indigestible, but old *waxy* potatoes are more so.

*Preparation for the Table.*—The best method of cooking



potatoes, is by steaming them in the skin; by this process heat penetrates everywhere, and there is no loss of material and salts. For this purpose a saucepan, one-fourth full of boiling water, is required, into which a closely fitting steamer is placed, containing the potatoes, the latter being so packed as to allow a free passage for the steam. If the potatoes are boiled, the skins should not be previously removed, or a large amount of salts will pass out.\* The addition of common table salt to the water is advantageous, for it helps to retain the natural salts. The boiling should be thorough, otherwise the starchy grains are undigested. From twenty-five to thirty-five minutes is the time usually required, according to the kind of potato boiled. Potatoes should be served up immediately they are cooked, and not, as is too frequently the case, placed over the fire at half-past eleven or twelve for one o'clock dinner. Towards the end of the season, old potatoes are improved by being peeled overnight and put into cold water, by which process they regain, in a measure, their natural color and consistency. Potatoes are rendered more digestible by being finally mashed, and mixed with a little red gravy as it runs from the cut surface of a joint. Roasted potatoes are more nutritious than boiled, and *Potato soup* is a better food by the addition of peas.

*Choice of Potatoes.*—They should be large and firm to the touch, should present no evidence of disease or fungi, should not have been exposed to frost; neither should they

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\* Dr. Letheby estimates the waste when the skins are removed at 14 per cent., when not removed at only 3 per cent.

be germinating or growing, for then the starch is undergoing a saccharine metamorphosis. Further, when cooked they should not be close, watery, or waxy; but floury or mealy.

*Carrots* make a pleasant change in one's vegetable fare, but are apt in some cases to produce flatulence. The less they have of the central yellow part, and the more of the outer red part, the better. The *Parsnip* possesses the same general characters as the carrot. Being sweet, it is well adapted for children's use, but should be avoided when old and stringy. The *Turnip* contains a very large proportion of water (91 per cent. according to Dr. Letheby), and hence is of little nutritive value, and is more difficult of digestion than carrots or parsnips. *Radishes* are somewhat like the turnip, but being usually eaten raw, are often indigestible.

We now turn to another class of vegetables. The leaves, shoots, and stems of some plants are valuable for food, chiefly on account of the salts they contain, and because they give variety to the diet. They should generally be grown quickly, in order that woody fibre may be less abundantly formed; and without much light, that the characteristic properties may not be unduly developed. If the chlorophyl, which gives the green color to vegetables, be abundant, it is apt to produce purging—indeed, green vegetables are always more or less relaxing. They are consequently useful when the bowels are constipated, and must be altogether avoided when Diarrhœa or Dysentery is present. They possess a high anti-scorbutic value. *In all cases they should be eaten as fresh as possible, for every hour's delay after they have ceased to grow renders them less digestible.*

*Cabbages, Savoy, Sprouts, Cauliflower, etc.,* are of the same general character; but as the proportion of water in their composition is very large, they are not very nutritive. Moreover, they are not easy of digestion, and therefore not suitable for dyspeptics; while the large proportion of sulphur they contain causes disagreeable flatulence of carbonic acid and sulphuretted hydrogen. *Cabbage*, however, is a most valuable anti-scorbutic, but if fermentation has begun its virtue is destroyed. Bleeding of the gums and *Purpura* are benefited by it. The best sorts of cabbage are the old white garden variety and the summer cauliflower. They should be soft but crisp before being cooked. *Spinach* is wholesome, and somewhat laxative. *Rhubarb* is eaten as a fruit rather than as vegetable, and requires to be well sweetened to make it palatable. As it contains oxalate of lime, it should be avoided by those who are subject to Calculus. *Celery* is indigestible when eaten raw. If so eaten, it should be with a light lunch of bread and cheese, not after a full meal. Stewed in beef gravy it makes a delicious and wholesome soup.

The *Asparagus* should be eaten as soon as possible after being cut. The greenest heads are to be preferred, as they contain the largest amount of the peculiar principles of the plant. There need be no fear that they will prove injurious to the kidneys, as some persons suppose. Slight cases of Rheumatism have been cured by eating freely of this plant; and chronic cases of rheumatic gout and gravel much relieved.

*Onions* are very wholesome vegetables, whether eaten raw, or stewed, or roasted; they are too strong, however,

for invalids when they have not been cooked, as they possess strongly irritant and stimulating properties. *Leeks* should be white, and have little smell; they are then soft and good, and very digestible. *Lettuce* is agreeable, cooling, and digestible as a salad; the juice is mildly soporific. *Water-cress* and *Mustard-and-Cress* form wholesome salad. *Cucumber*, eaten raw and quite fresh, may be taken with bread and cheese as a light lunch, but should not follow a more substantial meal, for it is indigestible, and apt to disagree with many persons. Stewed, it is light and wholesome.

*Mushrooms*, which are generally eaten after being stewed, to most persons are not injurious; though by dyspeptics they are best avoided, for sometimes they cause colic, vomiting, and purging. Those grown in open pastures are by far the best. It is not always easy to distinguish mushrooms from poisonous fungi, so that some caution is desirable in gathering and preparing them for food.

"A meadow mushroom should peel easily, and it should be of a clean pink color inside, like a baby's hand, and have a frill or 'curtain' (as botanists call it) attached to the stalk. When the gills are brown they are growing old and dry, and losing their nutritive qualities."—*Chambers*.

*Vegetable Broths*, made of any of the ordinary market vegetables, in season, by boiling and straining, are useful as substitutes for animal foods when the latter are not allowed. Out of season, dried vegetables may sometimes answer the purpose. In preparation of these, and in all other cookery for the sick, so far as possible, non-metallic surfaces only should be allowed to come in contact with the materials employed. A simple method is to put them into an ordin-

any basin or bowl, placing this in a saucepan of water and covering the basin with a saucer. The water in the saucepan is made to boil, and thereby the food is duly cooked.

*Fruits* are agreeable and refreshing; but as their proportion of water is high and of nitrogenous matter low, they are of little nutritive value. When taken in moderation they are very wholesome, counteracting the unhealthy condition which attends a diet of dried and salted provisions, and promoting a somewhat relaxed state of the bowels. Fruit is best eaten in the morning or at lunch. When consumed in large quantities fruit may be injurious; particularly if it be unripe or over-ripe,—in the former case by the action of the fruit-acids, in the latter by fermentation and decomposition. Fruit is very beneficial to gouty and rheumatic subjects, because the alkaline vegetable salts become decomposed in the system and diminish the acidity of the urine. But patients should avoid acid fruits, if Diarrhoea, or Dysentery, is present. The seeds of all fruits and vegetables, excepting grapes, if swallowed, may prove more or less irritating to the intestines, and in inflamed or ulcerated conditions may do irreparable mischief.

*Apples* are perhaps the most universally valuable of fruits. Eaten before or after meals as a dessert, or as an agreeable relish between times, if ripe and in proper condition, they are a healthy and nutritious article of food. Stewed or baked and eaten as a dessert or during the meal, they are at once agreeable, nourishing, and easy of digestion. Invalids can often take stewed or roasted apples when almost everything else is rejected or too heavy. They are decidedly beneficial in all cases of Rheumatism or Gout, and are only

to be avoided in cases of Diarrhœa and Dysentery. Roasted apples are somewhat laxative, and may be eaten to counteract Constipation. Dried apples are prepared for use by being stewed. *Pears*, when ripe, are more digestible than apples; but as they decay sooner, they are more likely to produce derangements of the bowels. When sound, juicy, and soluble, they may generally be taken without danger.

The *Orange* is one of the most agreeable and useful fruits for the sick-room; it is exceedingly grateful and refreshing, and is less likely to cause disorder than most other fruits. A heavy orange, with a fine thin rind, is usually the most juicy and the best adapted for the invalid. But the pulp should be carefully excluded. The *Lemon* is too acid to be eaten alone, except that its juice is grateful, refreshing, and *beneficial in rheumatic affections*; but in the form of lemonade it makes a cooling and wholesome drink for all occasions. Lemon-juice is very valuable as an anti-scorbutic; so also is *lime-juice*. Lemon is elsewhere recommended as an addition to tea.

*Plums* are less wholesome than most other fruits, unless cooked. They produce Colic and Diarrhœa, and are employed occasionally to promote relaxation in cases of Constipation of the bowels. *Cherries* also, when unripe or overripe, disorder the bowels. *Peaches*, and *Apricots*, when quite ripe, yield a delicious food for the invalid, but should be most carefully avoided in Dysentery and Diarrhœa; the skin should be rejected. *Grapes* are most refreshing, wholesome, and nutritious in the sick-room, when ripe, the skins and pips being rejected. *Raisins*, (dried grapes) contain more sugar and less acid than ripe grapes; they are con-



sequently more nutritious. If eaten too freely, especially if the skins or pips be swallowed, they are apt to disorder the stomach. *Gooseberries* and *Currants* (red, black, and white) are wholesome, cooling, refreshing and laxative in the sick-room; but generally interdicted in acute diseases. The *Cranberry* is too acid to be eaten raw, but makes an agreeable and wholesome sauce, or jelly. The *Strawberry* is one of the most delicate, luscious, and refreshing of summer fruits; and may, as a rule, be taken by invalids, except when *Diarrhœa* is present. The *Raspberry*, too, is agreeable and wholesome. So also is the *Blackberry*, which is credited with an astringent, or binding effect upon the bowels—especially in the form of *blackberry-wine*. *Melons* not unfrequently disagree with those whose digestive powers are weak. The *Water-melon*, forms a most agreeable and refreshing luxury, not of much nutritive value, but cooling, appetising and a stimulant of the kidneys. During the heats of summer it forms at once a delightful adjunct to any meal—and a cheerful solace to a weary system. It should only be avoided in *Diarrhœa* and *Dysentery*. *Musk-Melons*, *Cantaloupes*, *Green-fleshed Melons* are sweeter, often with a grateful musky odor, and contain a larger proportion of nutriment than the water-melon. They too may be eaten freely in their season, as the dessert to a repast, or alone—the only condition against their use being a relaxed state of the bowels. The *Pine-apple* should not be eaten by invalids; the pulp should be rejected if the juice be taken.

The *Fig* is sweet and nourishing; its pulp may be eaten by invalids, but if eaten too freely will irritate and disorder the bowels; the skin is rather indigestible. *Olive oil* is the

most digestible of fatty foods, even more so than fresh butter; it should, however, be thoroughly good, pale, clear, and free from rancid smell, to justify this estimate.

*Gum arabic*, which flows from the acacia in Arabia, Egypt, etc., is usually employed in the preparation of drinks. The clear gum should be selected, washed, and slowly dissolved in cold water. When made of the powdered article or with hot water the flavor is less agreeable. When flavored with a little sugar it is a refreshing and nourishing beverage for invalids. *Mucilage* differs from gum water in containing a larger proportion of the gum. It is admirably adapted for use in inflammation of the mucous membranes generally, as in catarrh, bronchitis, etc.

*Sugar*, an important alimentary product, chiefly found in the vegetable kingdom, also exists in the animal economy, and is there known as the sugar-of-milk. The vegetable sugar exists in two varieties—cane-sugar and grape-sugar. Cane-sugar is very sweet, and crystallizes easily; and though usually extracted from the cane, is also obtained from the beet-root, and is found in other vegetable forms. Grape sugar, or glucose, is inferior in sweetness and crystallizing power, and abounds in grapes and other fruits and vegetables. It may also be obtained, by chemical change, from cane-sugar, starch, gum, etc. It is chiefly used to adulterate cane-sugar. Sugar is valuable from a dietetic point of view, not only as rendering more palatable many articles of food; but also as productive of fat and force. As it is readily dissolved and diffused, it requires no preliminary digestion in order that it may be absorbed through the mucous membranes. In ordinary cases it does not, therefore, occasion

any gastric derangement; but when taken in excess, or by some dyspeptics, it is liable to undergo acid fermentation, and occasion acidity and flatulence. Sugar-of-milk, however, does not undergo this change. Coarse brown sugar always contains dirt, sand, and occasionally mites. Loaf sugar is the most free from adulteration. It should be borne in mind that sweetened food is apt soon to cloy the appetite of invalids, and that attention must be directed to what is savory to secure agreeable change.

Sugar is circulated in the sap of trees and plants just before the unfolding of the buds; and in some species, as in the birch and maple, is found in such abundance as to be collected and manufactured in large quantities. In the northern part of New-England, and in New York State, sugar making from the *sugar-maple* is a large branch of industry: the sugar being a most wholesome confection, while in the form of syrup, it furnishes the most delicate accompaniment to buckwheat, rice, or wheat cakes.

*Treacle*, or *Molasses* is the uncrystallized residue drained from brown raw sugar before it is purified, and is not objectionable as carbonaceous nutriment. The different forms of *Syrups* in the market are simply treacle purified by being re-boiled and filtered through animal charcoal. If largely taken these products are laxative. They are appropriately taken with all kinds of farinaceous food, such as bread-pudding, porridge, etc. *Honey* is of the same dietetic value as sugar, is slightly laxative, and is often used in the sick-room as a demulcent and emollient.

Such *condiments* as *vinegar*, *salt*, and *pepper* are of real dietetic value, as they make the food more tempting to the

palate, stimulate a flagging appetite, assist digestion by promoting the flow of secretions and the movements of the alimentary canal, and counteract the action of injurious ingredients of food. Their excessive use, however, promotes indigestion, and they are of less value in the sick-room, *salt* excepted. The constant presence of this mineral in the secretions, and the necessity for it in due proportions in the blood, indicate the importance of a proper supply with the food. This is evident in the instinctive desire of animals, and in our own craving for it when it is not supplied in sufficient quantity. It is essential to the maintenance of health, and must not be forgotten in the diet of the invalid.

Of the *spice-condiments*, such as *cinnamon*, *cassia*, *clove*, *nutmeg*, *allspice*, *capsicum*, *vanilla*, etc., it may be said in regard to their use, *first*, that they should not be used at all with food that can be relished without their addition; *second*, that that spice only should be used which best agrees with the natural taste; *third*, that the smallest quantity should be used that will satisfy the unperverted taste, and the quantity should never be increased. A healthy taste and appetite should not demand them at all: and, (moreover, they each possess medicinal powers, which may develop themselves if taken too freely by healthy persons; or which may interfere with the proper curative effects of medicines taken (homeopathically) by the sick.

*Ginger*, however, we consider as less objectionable; and, indeed, as a generally allowable condiment.

Vegetable acids, found in almost all fruits and vegetables, render an important service to the human system; but

*Vinegar* should not be regarded as an acid naturally adapted to the requirements of the system; and should only be used when the acid fruits and succulent vegetables cannot be procured.

*Vinegar* helps the stomach to digest both animal and vegetable food, particularly if the fibre is somewhat hard and difficult to break up. It is, therefore, the fitting accessory to such animal food as invalids should banish from their table; but can be made use of by those of weak digestion, when they wish to vary their diet with a cool salad. In this country the best vinegar is that obtained from apple-cider, as made by farmers; and its use is not only safe; but, also, if not taken too freely, beneficial. As to the *manufactured vinegars* so largely consumed in city and town use, we believe them to be generally so “doctored” with acids, etc., as to be highly objectionable and *dangerous*.

Both *cayenne* and *black pepper*, by stimulating the flow of gastric juice, are valuable aids to digestion, when used with discretion.

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We have said enough already to prove that the subject of food is one necessarily demanding the attention of all who have to do with the treatment of disease. By a suitable dietary, Medical Science has shown us that many maladies may be cured; and many troubles, such as indigestion, biliousness, gout, and diabetes, avoided. That the attention now paid to our food is not a mere passing fashion, is sufficiently evidenced by the fact that our best dietaries are becoming more truly scientific, and are engaging the attention of our most eminent minds. The food-combin-

ations of the present day indicate an advancing knowledge of the wants of the human organism, the requirements of its tissues, and of the effects of modern life upon the viscera. The Healing Art, which in its earlier days, conducted its operations with mystery, now invites the People to become its allies in the prevention and cure of disease—and, by popularizing the accumulated knowledge of centuries, secures for the People a greater degree of safety, comfort, and longevity than has obtained in any previous age.

In nothing is this more evident than in the greater care which the medical profession now inculcate and encourage among their patients, and the public generally, in regard to the *preparation of food*.

And it may not be amiss to offer, in this place, a few suggestions as to the different

### METHODS OF PREPARING FOOD.

The cooking of food subserves several important purposes and demands more intelligent consideration than is usually given to it. Good food may be wasted, or spoiled; and both the healthy and the diseased may thus be deprived of the anticipated flavor and nourishment which it should afford them. Cooking removes some things that might prove injurious, destroying any parasitic germs that may exist. It renders food more pleasant to the eye, agreeable to the palate, and digestible by the stomach. It softens connective tissue, relaxes muscular fibre, coagulates albumen and solidifies fibrin, thus making the whole substance less cohesive and more easily masticated, dissolved and assim-



ated. Previous beating and bruising facilitates the process, and renders the flesh more tender. The warmth of the food also aids digestion.

In cooking animal food, the following processes are in ordinary use; Boiling, Roasting, Broiling, Baking, Frying, Stewing. Speaking generally, about one-fourth of the weight is lost by cooking; the loss varying with the quality of the meat, and the process employed.\* A few practical hints as to these several processes of cooking are herewith given.

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\* Dr. Letheby's estimate of the percentage of this loss, is as follows:

	Boiling	Baking	Roasting
Beef, generally	20	29	31
Mutton, generally	20	31	35
“ Legs	20	32	33
“ Shoulders	24	32	34
“ Loins	30	33	36
“ Neck	25	32	34
Average	23	31	34

This loss arises chiefly from the evaporation of water, the escape of fat and nutritive juices, and the destructive action of heat: and, according to Dr. L., is least in boiling, greatest in roasting, because in the former process there is no evaporation of water. The perfection of cooking is to retain, as much as possible of the constituent elements of the meat; and this is accomplished, in the different methods adopted, by subjecting the meat at first to a strong, quick heat, which contracts the fibres, coagulates the albumen at the surface, and thus closes up the pores by which the nutritious juices would otherwise escape. A lower and less rapidly acting heat will then suffice; for, thereafter, the cooking goes on through the agency of the natural moisture of the flesh. Converted into vapor by the heat, a steaming takes place, so that, whether in the oven, or in the midst of boiling water, the meat is in reality cooked by its own steam. Thus prepared, the meat will be full of its own juice, which will flow forth as rich gravy, at the first cut.

*Boiling.*—The cut should be put suddenly into *boiling* water, and remain at boiling temperature for five or ten minutes, cold water should then be added to bring it down to about 165°, at which it should be kept for the whole period of cooking. By the contraction and coagulation of albumen caused by the first plunge, the internal juice of the meat is prevented from escaping into the surrounding water, or from being diluted by the entrance of water through the pores. *Mutton* and *fish* should be boiled in hard water, water to which salt has been added—or in sea-water. The scum which rises to the top of the water, during the boiling of meat, being always useless and unwholesome should be removed as completely as possible. Boiling is the best form of cooking for *vegetables*; carrots and cabbages can hardly be boiled too long. Soft water is essential for vegetables; they should be thoroughly cooked, so as to become soft, then strained in a cullender, and served as free from water as possible. *Steaming* is simply a form of boiling them in soft water.

*Roasting* is esteemed to be the best method of preparing animal food. To retain the nutritive juices, the joint should be placed close to a clear, strong fire, for five minutes, *at first*, and then removed to a greater distance until the last five minutes, when it should be brought near the fire again. The albumen and extractive matters are thus hardened into a case, which keeps together the valuable fibrinous particles until they have undergone the desired changes by slow heat; while objectionable oils generated by the charring of the surface, are carried off. The dripping is wholesome for the healthy; but indigestible

(especially if burned) when the stomach is at all weak. From a joint thus thoroughly roasted, the retained gravy will flow out freely at the first incision; and the meat, while yet red, will have lost all its purple color, even to the bone. The time required for roasting meat, depends upon the kind of meat, and, also, upon the size and weight of the joint. For beef, mutton and goose, fifteen minutes for each pound; for veal and pork, an additional five minutes; for poultry and game less. Lamb, veal, pork and chicken, and all young flesh is better when roasted, since the large proportion of albumen and gelatine contained in them, are subjected to less loss than when boiled.

*Stewing* is midway between roasting and boiling, and is by far the best process for digestion. The meat should be just covered with cold water, then heated up and kept simmering, not boiling, till thoroughly done. The nutritive materials are diffused through the solid and liquid, which are then served up together. *Hashing* is the same process with meat previously cooked. But hashed, or otherwise, *twice cooked meat* is unwholesome.

There is another excellent method—by which the meat is stewed in its own vapour alone. It is placed in a covered jar; the jar put into water in a saucepan and the water made to simmer—when a sufficient time has elapsed, the meat will be found to be quite tender and adapted to the invalid's use.

*Soups, Broths, etc.*—If, however, it is desirable to extract the nutriment so that it may be given in a liquid form, the meat should be chopped or minced, put into cold water, and

after maceration for a short time, gradually heated to a simmering temperature, at which it should be kept for half an hour if *broth* be required. But if *soup* be wanted the heating should go on to boiling point, and be maintained there, in order that the gelatine may be extracted to solidify the soup. Bones yield abundant gelatine, but require long boiling. Minced meat should be put into cold water for a time, never into boiling water at first.

The leanest meat is the best for *soup*-making; the least particle of fat renders it unwholesome as well as nauseous. Bones which require long boiling yield abundant gelatine.

*Broiling* is simply roasting applied to small portions of meat. A beef-steak, or mutton-chop should be done quickly on a gridiron over a clear, hot fire, free from smoke, so as to retain the juices; it should not, therefore, be pricked with a fork. *Fish* are best when broiled.

*Baking* meat is but an imperfect method of *roasting*; imperfect, because it usually takes place in an oven, which generally allows no escape for the volatile fatty acids which are generated. Baked meat, therefore, being richer and stronger than when roasted before the open fire, is less adapted for easy digestion. When, however, it is enclosed in a thick pie-dish, or some sort of a crust (like the Cornish pie) and slowly baked—no charring occurs; but the fat and gravy oozing out, assist the cooking and the result is delicious.

*Vegetables* should be *slowly* baked. *Eggs* should be sparingly used in baked dishes, as prolonged cooking solidifies their albumen and renders it more indigestible.

*Frying* is a method of cooking not much esteemed, either

by physicians, or by persons of refined culinary tastes. The fat in which the meat is cooked produces an excess of volatile acids; and, when, as often happens, it is burnt, it causes flatulence and heartburn. Still, food *can* be fried so as to be wholesome. A perfectly clean frying-pan; a clear smokeless fire; good pure, clean fat or clarified dripping, or a small quantity of oil, or genuine fresh butter—are essentials. Then the frying should be done quickly, lightly, and evenly, and with constant motion, so that the oil or fat is not allowed to burn. The fat should actually boil and the meat, fish, or vegetables be turned around in it till they are lightly cooked without being scorched;—then drain the oil away, and serve hot.

Meat, by being salted, is made less nutritious, and more difficult of solution by the digestive secretions—and, though soaking it in water often softens it and removes the salt (“freshens it”) it does not restore the nutritive value. *Drying* is less prejudicial to the meat. Meat *preserved in cans* is too much cooked to be very digestible—and is best eaten, when only warmed up, not cooked again, and served with vegetables, etc.

*Scrupulous cleanliness* in the preparation of food, is absolutely necessary for the comfort of the invalid. A disagreeable flavor remaining in a dish from some previous use; or even from materials used to cleanse it, may suffice to spoil the taste of something intended to tempt the appetite, or satisfy the fastidious digestion of an invalid.

Food should be cooked at such a distance, and with such precautions that *no odor from it can reach the sick-room*; and the bed-room itself is the very last place in the world

where food should be prepared. If prepared, too, without the knowledge of the patient, it will generally be relished more keenly than if he is at first consulted as to what he is to have, and how it is to be cooked. If too great a quantity is prepared at once, it destroys the patient's appetite; while that which is left grows stale and unfit for use. Invalids should always have their food supplied in such quantity as will be a little short of what they can eat. If any remain over, it should be immediately removed to a cool place, away from the sick-room. Food, milk, fruit, jelly, etc., allowed to stand in a sick-room, does not become more appetising by being looked at; it deteriorates in quality; and acquires a taint from the atmosphere of the room. Remember—that perfect cleanliness alone can give food an appetising appearance, and that ignorance and carelessness in a sick-room is very objectionable, even when combined with any amount of family affection.

## II. BEVERAGES.

A man requires, including what he takes with his meals, from two to three pints of fluid daily. This includes, also, what is taken in the form of fruits, these being largely composed of water. Melons, grapes, berries, etc., being from 90 to 98 per cent of water, may largely supply its place in our foods. Drinks should be taken chiefly with the meals; a moderate amount favors digestion, but a large amount hinders it. Of course, WATER is the first, MILK the second, and FRUIT the third great provision made by nature for the slaking of man's thirst; of the two latter we have



already spoken (pages 71 and 97), of the former we shall hereafter speak. There are, however, other non-intoxicating beverages, such as *tea*, *coffee*, *cocoa*, etc., which are so universally used in every part of the world, as to claim our attention as foods, and in their dietetic relations to disease.

*Tea* cannot be regarded as a nutriment, in the sense of supplying material to maintain structure, or generate heat by its own decomposition; but it is, nevertheless, a very valuable article of diet, as shown by experience, and also by direct experiments on the vital functions, as its especial office is to *prevent tissue waste*.

Both experience and direct experiments prove that it is an excitator of vital action, and stimulates respiration. Though it supplies very little nutritive material, it aids the assimilation and transformation of other foods, increases cheerfulness and activity of mind, clears and quickens the brain, stimulates the energies and lessens the disposition for sleep. Its restorative action on the nervous system renders it a boon to weary, anxious, studious, or exhausted persons; and it is far preferable to alcoholic stimulants after fatigue. Against heat or cold; in nervous exhaustion occasioned by bodily exercise, and followed by shortness of breath, especially in hot climates, it is also efficacious. While a promoter of digestion in healthy, well-fed persons, it is best taken after a meal, when the process of assimilation needs quickening; and, if much used with an insufficient amount of solid food, as frequently in the case of the poor, is injurious—since it promotes the transformation of food without supplying nourishment, and increases the loss of heat without supplying food. The young and the feeble should

not use it; nor should it be used *too strong* or too frequently, as it is liable to cause Dyspepsia,—especially that form which is accompanied by flatulence. When it causes loss of appetite, palpitation of the heart, mental excitement, depression of mind and sleeplessness, obviously its use should be discontinued. Children should never have it.

In the preparation of tea three principles are extracted; one aromatic (*oil*), another nitrogenous (*theine*), the other astringent and bitter (*tannin*). The last, the cause of gastric disorder, is only given off after prolonged infusion; whereas the aromatic oil and theine are completely extracted in about two minutes. Hence to make tea, especially for the dyspeptic, it should be made by pouring *boiling* water (not water that *has* boiled) on the leaves, and allowing it to stand for two minutes. It may then be poured off into a heated teapot, so as to separate it from the leaves. Thus prepared, tea is not so likely to cause flatulence; but it is less economic than the ordinary method, much more tea being required to give flavor. If the tea be good the infusion will be fragrant, not very deep in color; not harsh nor bitter to the taste. The leaves should not be boiled, otherwise the peculiar volatile aromatic principle is dissipated; nor, for the same reason, should the infusion stand long; in this case also too much roughness and bitterness are added to the flavor by the extraction of tannin. This tannin, though it makes the tea look strong, is worse than useless, inasmuch as it renders the food taken with the tea insoluble and indigestible. The finest teas color the water the least. In an ordinary infusion the first cup of tea is also the best, having more of the choice flavor and aroma, and less of the

astringency and color. River water makes the best tea; soft water is to be preferred to hard; but soda should not be used, for it only extracts the astringent tannin. The water should only boil once, immediately before using it, and not for hours, as is sometimes the case; the teapot should be quite *dry*, as well as hot, when the leaves are put into it, and the infusion, as before stated, not allowed to exceed two minutes.

Teapots that retain the heat are better than those that allow it to pass off readily; hence unglazed earthenware teapots should not be used; but well-glazed earthenware, or porcelain, are suitable; and brightly polished silver teapots are the best, for they radiate much less heat than any other material.

The Chinese drink their tea without any admixture; the Russians add lemon-juice; the English, sugar and cream or milk.

*The use of sugar in tea.*—Except in small quantity, tea should be given up by persons who have a tendency to become corpulent. According to some tastes, the flavor of tea is improved by substituting lemon for cream or milk, —pouring the hot tea over a slice of lemon cut with the rind upon it. Besides being more palatable, the lemon-juice more effectually allays thirst, and is especially valuable at those seasons of the year when fruits and fresh vegetables are not generally to be obtained.

Teas are divided into three great classes, *Green*, *Black* and *Scented*. Gunpowder, Hyson, young Hyson, Imperial, Japan and Java, both colored and uncolored, are *Green teas*. Among *Black* teas, we have Congou, Souchong, Oolong, Orange-

Pekoe, Canton. The *Black* are the *allowable Teas* in Homœopathic practice, as all others are supposed to be artificially colored, and thus may have medical or antidotal properties. There is a good deal of mystification in the popular mind about teas, and their varieties and respective values. There is, however, but one kind of plant from which tea is made, wherever it is found, although by cultivation it may have produced varieties; and the whole principle involved in the process of manufacture is not that of any important mechanical change, but simply the drying of the leaf for preservation and for future use with the least possible injury.

All teas possess approximately the same amount of *theine*; and, for dietetic purposes, are all equal, whatever their price. But nearly all persons go further than mere utility, and seek for *luxury* in the flavor of tea. Fortunately, the lowest priced genuine tea has sufficient flavor to satisfy the desires of ordinary consumers.

*Coffee* contains the same principle as tea, and hence has an analogous influence upon the system. It is, however, more heating and stimulating, heavier and more oppressive to the digestive organs, and decidedly increases the force and frequency of the pulse; while its quickening effect upon the mental faculties is not so marked as that of tea. It is especially valuable to persons engaged in out-of-doorwork; it invigorates without producing subsequent collapse; and, taken hot, is an antidote almost equally to heat and cold; in both cases beneficially stimulating the nervous system. In fatigue, privation, and under ordinary circumstances, coffee is preferable to alcoholic beverages. It is useful when weary from travel in the heat, *with deprivation of food*.

It economises other nourishment by lessening waste. It is often serviceable in the headache of nervousness and exhaustion, or in cases of Diarrhoea caused by overwork, with *too much care*. A strong infusion helps persons poisoned by *opium*; and allays the effects of the immoderate use of wine and spirits. Its excessive use by nervous persons induces sleeplessness, mental excitement, palpitation and indigestion; and, when such results are produced, it should be avoided.

The making of good coffee depends largely upon the quantity used. The minimum rule is  $1\frac{1}{4}$  oz. to a pint of water; soft water being preferable. The French *café noir* contains a larger proportion than this. *Café au lait* consists of a decoction of strong coffee, to which an equal quantity of hot milk is added. It should be remembered that the full qualities of coffee are not obtained if water is used at a temperature lower than that of the boiling-point. Particles of ground coffee are often found suspended in the liquid, and isinglass, or white of egg, is sometimes used to refine it. Nothing, however, is required beyond pouring a cupful out and returning it to the pot, to effect the necessary cleaning. The addition of boiling milk, in the proportion of one-fourth part, adds greatly to the flavor and virtue of coffee. When taken daily, it should be prepared in an enamelled saucepan. The best coffee is Mocha, which is best purchased in the form of whole beans, which are to be then roasted, ground, and chicory added to taste. The *roasting* is a matter on which the delicacy of the coffee greatly depends. If too little roasted, the oil and empyreumatic elements are not developed; if too much roasted, they

may be destroyed. Coffee beans, when roasted, may be either reddish-brown, chestnut-brown or dark-brown—the latter being probably the best. Coffee should be quickly ground after roasting, and in a mill, or mortar not used for other purposes, as it easily absorbs odors; and when ground it should be speedily used, lest it lose its volatile oil. It should be kept in an accurately stopped bottle.

*Cocoa and Chocolate* are valuable foods, since they are not only allied to tea and coffee as respiratory excitants, but possess a large quantity of fat and other food materials.\* Their peculiar active principle, *theobromine*, resembles the *theine* of tea and the *caffeine* of coffee, but is less exciting than either of these to the nervous system. *Chocolate* is the cocoa beans ground, mixed with sugar; and *cocoa-nibs* are the inside of the beans, roughly broken, and which of course are the freest from adulteration of any form of cocoa preparation; but they need to be boiled many hours in water; whereas the prepared cocoa or chocolate is soluble in boiling water. The large amount of fatty substance in cocoa renders it heavy and oppressive to a weak stomach, and thus unsuitable to the dyspeptic or bilious.

But, with this exception, cocoa is a valuable article of diet for strengthening the frame in conditions of debility, and sustaining it under prolonged or excessive exertion. During nursing it is most useful, tending, probably more than any other beverage, to maintain an excellent supply of maternal milk—which is somewhat resembles in the combination of its nourishing properties.

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\* Of fat about 50 per cent; of albuminoid substances about 20 per cent.



The following is the receipt for making chocolate, furnished by Miss EVARTS, of Washington, whose preparation of this delicious drink, at the receptions given by her father, the late Secretary of State, assumed the character of a veritable "Society sensation"; viz.: Break up the chocolate and place in a warm spot to melt. Put it in a farina kettle and pour on boiling milk, stirring all the while, and constantly during the cooking. Let it boil some minutes and serve with whipped cream. Use Maillard's chocolate, already sweetened.

ALCOHOLS. This class of substances usually regarded as foods. comprises *Spirits* (Whisky, Brandy, Gin, Rum, etc.), *Wine*, *Beer*, *Porter*, *Ale*, and other fermented drinks, all having the one element, ALCOHOL, in common. But they are not, therefore, alike in their effects upon the system. Still, we do not propose, in this place, to discuss their special points of difference; nor is it necessary that we should, in this connection, enter into the *moral* questions involved in the use of liquors.

Physiological science directly proves, 1. that Alcohol is a narcotic, which yearly kills its thousands, slowly, indirectly, and by painful disease; 2. that it does not, in any sense, supply vital heat, as is so commonly supposed; and that it does not prevent the loss of heat as those imagine "who take just a drop to keep out the cold"—in fact, that death by cold is hastened by its use; 3. that, while it gives what is called "a happy fillip to the heart," still this increase of action is unquestionably injurious to the heart and to the body at large, since it subjects both the heart, and the body in all its parts, to irregularity of blood-supply; and weakens

and degrades both;\* 4. that the so-called stimulation of the system by alcohol is, in fact, a relaxation—we might as well say, a *paralysis* of one of the most important mechanisms in the animal body, viz.—the minute, resisting, compensating circulation; that the temporary excitement it produces is at the expense of the animal force, and is in truth wasted force—the running down of the animal mechanism before it has served out its time of motion; 5. that the brilliancy which it gives to the mental powers is but transient; and that to the muscular force the very slightest excess of alcoholic influence is injurious—both mental and physical powers being ultimately worse for its use; 6. that, even in the case of long-lived steady drinkers it still works its destined end; for, while all the organs of the body are being slowly brought into a state of adaptation to receive and dispose of it,—in that very preparation they are themselves undergoing physical changes tending to the destruction of their function, and the perversion of their structure—as revealed in *post-mortem* examination, by evidences of alcoholic phthisis; of cirrhosis of the liver; of degeneration of kidney; of disease of brain-membranes; of disease of the substance of the brain and spinal cord; of degeneration of the heart, etc., etc.

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\* While alcohol stimulates the heart's-action and blood-supply, both through the large vessels and the capillaries or extreme small vessels; tobacco, acts in a diametrically opposite direction, by diminishing the force and volume of the heart's-action and the capacity of the vessels, and so these two mischievous agents, play directly into each other's hands; alcohol calling for the tobacco, and the tobacco answering by calling for the alcohol, to raise the system from its depressing influence.—See, also, tobacco, page 120.

We admit that there seem to be moments in the life of man when the use of alcoholic stimulants appears to lift oppression from the heart, lets flow a brisker currant of blood into the flagging organs, aids nutritive changes, and is of temporary service to man. If its use could be limited to this one action, this one purpose, it would be one of Nature's best gift to mankind. Unhappily, however, the border-line between this use and the abuse of it; the temptation to extend beyond the use; the habit to apply the use when it is not wanted, as readily as when it is wanted, far overbalances the temporary value that attaches to alcohol as a physiological agent. Hence, it is a dangerous thing even in the hands of the strong and wise; it is a murderous thing in the hands of the foolish and weak.

Healthy persons—as well as invalids—should, therefore, accustom themselves to do without stimulants, excepting in the rare instances when their use is thought to be necessary by their medical advisers; and then, like other medicines, they should be the best and purest of their kind—and *should only be taken*—if at all—, *with food*, or at meal-times.

Digestion, itself, is not—as is popularly supposed--aided by their use. Even a moderate quantity of stimulants seems to delay and protract the digestive process—from their causing congestion of the gastric glands, whose secretory power is thereby lessened or arrested. In other cases, they interfere with the solvent chemical action of the gastric juice, if they do not actually decompose it; and, if taken in any quantity, they seem to act as a sort of pickle or preservative to the food, preventing its ready solution. They, also, have a marked tendency to produce an inflamm-

ation of the mucous lining of the stomach, kidneys, liver, spleen, bladder, etc.

*Tobacco* only requires to be mentioned to deplore its very extensive use; to particularize some of the peculiarities, of its action, and to council its avoidance. Its especial physiological action is upon the circulatory system, causing, through its effects upon the inhibitory nerves governing the action of the heart and large vessels, a weakened impulse of the heart, and diminished caliber of the circulation. This is seen in the pallor of the skin, and nausea, from the arrest of capillary circulation, in its first action upon persons unaccustomed to its influence. This diminished circulation and consequent impaired nutrition, is very manifest in its effects upon the young, causing imperfect development, smaller stature, nervousness, impaired circulation and, often, disease of the heart as well as other disorders. But, more than this, the constant limiting of the heart's-action and diminished blood-supply, tells upon the nutrition, by causing a desire or want for something that will unlock the circulation and give an impulse to the heart's-action. This is best supplied by alcoholic drinks, and so the use of tobacco and whiskey, goes hand in hand; thus tobacco is a vast provocation of intemperance and vice. The expense of tobacco is more than the expense of clothing to its average user; while it amounts to more, in a life time, than the average savings of the adult man, taking the average of the entire United States, as shown by the statistics. It is a dirty, degrading habit, every way objectionable and without a single redeeming recommendation.

## III. WATER.

Water enters into the composition of the tissues of the body, forms a necessary part of its structure, and performs such important purposes in the animal economy, as to be absolutely indispensable for life and health. It gives fluidity to the blood, holding in suspension, or solution, the red globules, fibrine, albumen, and other substances which enter into the different structures; the whole body being formed from the blood. Not only the soft parts of the body, but even the bones, or the materials of which they are composed, have at one time flowed in the current of the blood. A human body, weighing 154 lbs., contains 111 lbs. of water; a fact which suggests the importance of obtaining pure water for drinking and cooking purposes.

Water should be clear, transparent, and free from suspended particles; and should be entirely without smell; some colored waters, however, are fairly wholesome when the coloring matter is iron, clay or peat; while some clear waters are unwholesome from containing organic (decaying vegetable-) or animal-matter. Spring-, river-, sea-, surface-, well-, and mineral-water, all contain various substances dissolved in them, which may render them, without distillation or filtration, unsuitable for drinking, or even to be used in the preparation of articles of diet. Even for cooking purposes and bathing, the purer the water is the better. The purest water is obtained from deep wells, bored through the earth and clay down to the lower strata of gravel or rock (*Artesian Wells*).

It is most important that the receptacles for water—tanks

and cisterns—should be carefully examined and thoroughly cleansed at regular seasons, especially after a time of drought and before the approach of winter. Disease is often induced, by allowing cisterns to fill up after they have been dry, or the water in them low; the quantity of sediment and filth is often very great, and, if not carefully washed out, becomes mingled with every fresh influx of water, and thus Diphtheria, Enteric Fever, and other blood diseases may be set up. They should also be provided with a cover to exclude dust and other foreign matter.

It is a fallacy to suppose that surface-well water is purer than that obtained from deep wells, because it is more sparkling, and often cooler and clearer. The sparkling of these waters is due to the presence of carbonic acid gas, derived from the decomposition of animal and vegetable substances.

This matter of the *purity of water is of vital importance to every family in the land*, whether living in the country or town. In cases of suspected impurity of water-supply, careful and extended search should be made for every possible cause of impurity; and, in order to form a proper opinion, a chemical and microscopical examination of the water is frequently necessary. A rough, and easily available test, however, may be applied; half fill a clean stoppered bottle with the suspected water, replace the stopper and let it stand in a warm place for five days, when there will be a disagreeable putrid smell if it contains organic matter. If water is bad, either from containing organic matter, or from being too “hard,” that used for drinking, cooking, and washing dishes should first be *boiled* and then



filtered. Boiling throws down most of the salts which cause temporary hardness and crusts in kettles, leaving the water much softer; and, after standing a day, or being poured from vessel to vessel several times to get back the air expelled by heat, (for water needs *air* to vivify it) it is also more palatable. Boiling also destroys some of the organic matter, and in most cases renders the remainder innocuous by destroying the disease-germs.

When practicable, water used for domestic purposes should be *filtered*. This removes the grosser impurities, destroys some of the organic matter; and, if the material used be spongy iron, or vegetable charcoal, it will for a time remove some of the salts in solution. Whatever the filtering-material used, it should be renewed every three to twelve weeks, according to the quality and quantity of the water passed through it; and filters which claim to last for ever, or to be self-cleansing, should be *avoided*. When a filter ceases to do good, it begins to do harm. Compressed charcoal block-filters are cheap and good; one can easily be made, in any family.\*

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\* FILTER.—Get a 12-inch flower-pot; cover the hole in the bottom with a piece of perforated zinc, and fill in the pot with some well-washed gravel, (with the larger pieces below), to a depth of 3 inches; above the gravel put 3 inches thick of white sand which has been well-washed; above this sand place 4 inches thick of good charcoal (about 4 lbs. weight) which has been washed in a jug by pouring boiling water over it, and when the charcoal has settled, the water poured off and more poured on until it has been washed four times. When the filter is finished pour the water to be filtered into the flower-pot, and let it run through the hole into a glass-bottle, or receptacle, below. If the charcoal gets clogged from continual use, scrape some off the top, boil it two or three times, dry it before the fire, and it is greatly benefited.

If drinking water is kept in the house, it should be in glazed earthenware or stone jars, with covers, which should occasionally be emptied and wiped with a clean cloth.

#### IV. AIR.

A proper supply of pure, fresh, air is essential to the preservation, as well as to the enjoyment, of life and health. Although life may not be destroyed suddenly by breathing an impure atmosphere, still the vital energies are thereby slowly but surely impaired; especially in the case of growing children and persons suffering from disease.

Air may be rendered impure in many ways; by gases and matters held in suspension; by particles of carbon, hairs, fibres of cotton or woollen fabrics; by minute seeds, or spores, germs, pollen or other light vegetable bodies; vapors arising from decomposing animal and vegetable matter; and, also, by the specific virus of contagious diseases. In the process of breathing, also, the air loses a third part of its oxygen, and receives in exchange carbonic acid gas, a gas not only incapable of supporting animal life, but actually destructive to it. Such is the change effected by a solitary act of breathing; and, if this process goes on in an ill-ventilated room, where several human beings are gathered together, the carbonic acid gas accumulates, usurps the place of the oxygen consumed, and so renders the air less and less fit for the renewal of life.

Efficient ventilation cannot well be secured unless space be made for the egress, from the upper part of a room, of the impure air; and provision made, in the lower part, for

access of fresh air from the surrounding atmosphere. Provision should be made for this process of ventilation in all well-constructed houses; and, more especially, in all *sleeping-apartments*. This latter is one of the *most important requirements of life, both in health and disease*. Bed-rooms are generally too small, and badly ventilated. The doors, windows, and even chimneys, are often closed; and every aperture closed so as to exclude fresh air. In consequence, the atmosphere of the whole apartment becomes highly injurious, from the consumption of its oxygen, the formation of carbonic acid, and bodily exhalations. In such an atmosphere, the sleep is heavy and unrefreshing, partaking more of the character of insensibility. If provision were made for the admission of fresh air, and the escape of impure air, the sleep would be lighter, shorter, and more invigorating. In nearly every instance, the door of the bedroom may be left open, and the upper part of the window let down a few inches—a greater or less extent according to the state of the weather—with perfect safety. A current of air may be prevented from playing on the face of the occupant by placing the bed in a proper situation, or by suspending a single curtain from the ceiling. During thick fogs or severe winds, the apertures directly communicating with the external air may be closed, and ventilation secured from the adjoining stair-landing.

The sanitary arrangements of *schools* are often exceedingly defective. Children, being even more sensitive than grown persons to the evil effects of bad air, it becomes of the utmost importance that the rooms, in which they spend so much of their daily lives, should be abundantly supplied

with fresh air. The school-room should be elevated, with a sufficient ventilation near the ceiling; and the windows should reach to near the ceiling, with facilities for dropping them from the top.

What is true of school-rooms applies to *churches* and to all *law-courts, public-halls*, and places where many people are, from time to time, assembled. In such a vitiated atmosphere, also, whether in a public building, or private house, the risk of contagion from Scarlet Fever, Measles, Small-Pox, Hooping Cough, or Typhus, is greatly intensified.

## V. SUNLIGHT.

“Where *light* is not permitted to enter, the *physician* will have to go” is a well-known Italian proverb. Sunlight is as necessary for the health, growth and development of human beings, as for plants. Especially is this true of children—particularly those who are feeble and delicate. Houses are only fit to be used as sleeping-apartments by night, when they have been well-aired by day. Rickets, deviations and enlargements of the bones, spinal curvatures and other deformities are far more liable to occur among those living in the shade, or deprived of their due proportion of sunlight. Even Cholera, Typhus or other epidemic diseases are more frequent and severe on the shady than on the sunny sides of the streets. The sun-lit sides of hospitals afford twice the number of recoveries, to the shady sides, even under the same hygienic and medical treatment. *Whether your home be large or small, give it light.*

Children, even at an early age should not be excluded.

particularly during the warm periods of the year, from the genial and cheering influence of the sun. The sanitary effect of the light can easily be made available even during the winter months (in rooms properly ventilated and heated) with little or no danger. Great benefit would accrue to their health by giving children “solar-air-baths”; that is, permitting them to lie naked upon the bed, or floor, free from the incumbrance of swaddling clothes, so that their bodies may be thoroughly brought under the influence, for some period of the day, of good air and bright sunlight. Except in *severe* inflammatory diseases of the eyes or brain, the very common practice of *darkening the sick-room* is a very objectionable one in many respects.

## VI. HEALTHY DWELLINGS.

The especial point for a healthy dwelling should be *dryness*; particularly as to the foundation-wall and roof. The site should be dry, from which the water will run; and, if not upon a natural slope, the artificial drainage should be perfect. The aspect should be southerly; and the wind should have free access to every side. The sleeping-rooms should, if possible, face the sun; and the house be above the mists or vapors which arise from water, or marshy ground, after sun-set.

The house should not be too closely surrounded by trees, or in thick woods, which only serve to attract and retain moisture, exclude sunlight, and prevent the free circulation of air. A cheerful situation, with sunlight, green trees, fields, shrubs, etc., is always beneficial. If in town,

the house should face a park, square, or other open place, or at least be in a wide, airy street, with a favorable aspect.

In old houses, particularly, we sometimes find that great carelessness has been shown in the original planning; so that cesspools, and wells for drinking and cooking are in close proximity to each other. This affords a source of extreme danger to health. It may be laid down, as an absolute rule, that *all water-closets*, as well as all *sinks* and *washing-places*, whether for the person or for clothing, *should be placed as far as possible from the dwelling part of the house*; and so arranged that any emanations from them will not be likely to be carried to the latter, by currents of air. *Water-closets* should drain into properly constructed, deep, and thoroughly-walled vaults, quite separate from the house. Into this vault house-drainage of all sorts should flow, and *well-trapped* water-closets should discharge. This *vault*, and the *pipes leading thereto* should be placed as far as possible from the *water-supply pipes*. These closets, also, whether inside or outside of a house, should always be *ventilated*, by *shafts for the purpose, leading directly to the open air*. If foul odors are, at any time, noticed, their *source* should be promptly enquired into, and the leak or other defect remedied; *kitchen-sinks* and *stationary wash-stands* (when these latter nuisances exist) *should empty their foul contents by a separate outfall from that of the water-closets*. As a general rule, however well-arranged a system of sewerage a town possesses, it is safer to have the drainage of each house provided for separately; and not in common with that of the adjoining house or houses.

*Cellars* should, also, be kept clean and freely ventilated,



especially when—as in country-houses—quantities of vegetables are stored in them for months together. Many a case of typhoid-fever has arisen from impure air, engendered by a mass of decaying, fermenting vegetable-matter in the cellar. For the same reason, *refrigerators* should be frequently cleaned and *aired*.

Especially should the *bed-room*, in which one third, at least, of the whole life is spent, be particularly well aired and cared for. It should be so planned that never less than 400 cubic feet of space should be given to each occupant, however good the ventilation may be. The walls should be kalsomined, or painted; so that they can be washed three or four times a year. The windows should have nothing more than a blind, and a half muslin curtain. The floors should be well made of hard wood, smooth and well-joined; and provided with carpets, or rugs, only around the beds; without valances from the beds. The furniture should be as simple and scanty as possible; chairs free from all stuffing or covers to catch and hold dust. And especially should the room be kept free from all articles of clothing not in use. From time to time, a fire should be made in every bed-room, that a free current of air may sweep through it from open doors and windows. Dry scrubbing is the best method of floor-cleansing. Maintain an equal temperature of about 60° Fahr., and a free access of dry air.

## VII. EXERCISE.

Exercise strengthens and invigorates every function of the body, and is essential to health and long life. All employed in sedentary occupations should endeavor to have

at least one hour in the day in the open air, walking, riding, gardening, etc.,—or, if this cannot be accomplished, then the use of the *light* dumb-bells, or gymnastic practice may be substituted. Any action which quickens the breathing and pulse is exercise; the object being to eliminate the waste products from the blood, by means of the lungs. Where too much food and too little exercise are taken, part of the carbon which ought to have been burnt off from the lungs as carbonic acid, is stored up as fat—and often in the wrong place and to the detriment of the individual.

The walk for health should be diversified, and if possible include ascents and descents, and varying scenery; and be alternated, when circumstances admit of it, with riding on horseback, active gardening, or similar pursuits. Athletic sports and manly exercises should form a part of the education of youth, nor should they be neglected in after life, especially by persons of sedentary pursuits. Many aches and pains would rapidly vanish if the circulation were quickened by a judicious and regular use of the muscles.\*

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\* Every one has in his own room the means of exercising every muscle of his body. By standing erect, unencumbered with any clothing which shall embarrass the action, and making the motions of rapid walking without advancing, at the same time extending the arms, expanding the chest, and lifting up and letting down the shoulder-blades, we bring into action nearly all the voluntary muscles of the body; and then, to give tension and strength to the muscles, we may lift some article of furniture, according to the strength, as the end of the sofa, the bureau, or the foot or head of the bed, and thus get every practical benefit that can be had from the most complicated gymnastic apparatus. If the exercise has been neglected till the chest has become contracted and the lungs compressed, we may need the assistance of some pulleys on the wall, attached to weights,

The proper periods for exercise are when the system is not depressed by fasting or fatigue, or oppressed by the process of digestion. The robust may take exercise before breakfast; but delicate persons, had better defer it till from one to three hours after breakfast. After severe and long-continued bodily exertions the next meal should be light and digestible; and when subjected to continuous exertion for many hours together, light digestible food should be given every two hours, to keep a continuous stream of chyle pouring into the blood like the fuel into the furnace of a steam-boiler.

In very severe exertion the nervous energy is exhausted so far that there is not enough left for proper digestion;

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or springs, so that by placing the back to them, and taking hold and pulling forward with the hands over the shoulders, the chest is expanded, and for a time, till we have acquired sufficient tension and strength of muscle, we may derive advantage from raising, in a proper position, graduated weights; but having acquired the necessary tension and power for ordinary purposes of life and health, nothing is gained by bringing the muscles into fuller power or activity. All the instructions which any man of common sense needs, can be given in five minutes; indeed they are all included in the hints given above. An intelligent mother, therefore, in her own house, can develop the form of her daughter much better than a professional gymnast; and, if mothers, when their daughters are beginning to develop into womanhood, and to feel the restraints of society, would just regard these hints, and insist, as a matter of duty, that they should exercise every muscle of the body every day, and conform in other respects to the hygienic laws elsewhere described, Nature will do for them all else that is necessary to develop perfect forms and perfect health. If this is neglected, it is folly to expect that a few months of tuition at a gymnasium will do much for them. At most it can only prepare the way for domestic exercise in such as have waked up to a sense of duty when the health of their daughters has already suffered from neglect, and then be of use only as exercise is afterwards continued.—*Bellows.*

thus, if exercise is taken shortly *before* eating, the sudden demand for nervous energy *stops* digestion; or, if taken soon *after*, the want of nervous energy *prevents* digestion, and the food lies fermenting in the stomach, causing irritation, and laying the foundation of dyspepsia.

Many nervous diseases are cured, or vastly ameliorated, by careful and regular exercise, *and occupation*.

Invalids should always be moderate in their exercise; take only short walks, avoid fatigue, and not *stand* in the open air. The best time for them is in the forenoon, arranged so that they can rest for half an hour before dinner. They should never take exercise *immediately* before a meal, or going to bed.

In the case of very feeble and infirm persons, carriage exercise, if such it may be called, and frictions, by means of bath-sheets and gloves, over the surface of the body and extremities, are the best substitutes for active exertion.

## VIII. CLOTHING.

CLOTHING serves the threefold purpose of regulating the temperature of the body; of protection, and of ornament. It has no power of generating heat, but only restrains its escape from the person. Approximately, the human body, when clothed, resembles a jacketed steam-pipe; the clothing forms the outer cover, between which and the body there is a layer of steam and heat constantly ascending. The place where this current of hot air and steam passes out into the atmosphere is the narrow ring between the neck and shirt-collar. This opening, therefore, plays an important part in

maintaining the temperature of the human body. If it is enlarged, the heat and steam escape more rapidly, and the skin is soon cooled; if, on the contrary, it is wholly or partly closed by being closely buttoned, or by a muffler, then the loss of steam is stopped, and the temperature of the skin raised. It is for this reason, that the constant wearing of a muffler is so objectionable, because it impedes the evaporation of matter which ought to pass out of the skin; though, for the same reason, it is of great value in case of cold. The neck opening should be ample, so as not to compress or impede the circulation from the head.

While the dampness of the atmosphere affects the evaporation which takes place, through the lungs as well as the skin, clothing, by night as by day, regulates that of the latter. All covering which impedes this natural process of evaporation acts injuriously. Though no material is quite faultless in this respect, there is still a great difference in their structures. The more *impervious* they are, the more are they to be avoided. *India-rubber* is the worst material, since it does not allow of the passage of any moisture, (as for example,—the sweating of the feet when cased in india-rubber shoes); *leather* is next; *linen* next; *cotton* is better, being porous to a certain extent; but *woolen* material is, by far, the best for wear. A flannel shirt is healthier than a cotton one; a woolen blanket at night than a linen sheet.

Moreover, as the skin's proper action depends upon the circulation of the blood under its surface; and, as the latter is promoted by friction, it is evident that a clothing-material which induces some friction is also healthier—thus the rougher materials for underclothing, such as woolen or

coarse cotton, is preferable to the softer, but more enervating, linen, or silk. Still, there are cases, in which (owing to its more delicate nature and texture, as well as to its being a non-conductor of electricity) silk is preferable for underclothing, in rheumatism, etc.

Inasmuch, also, as warmth tends to keep open the pores of the skin, and open pores are an essential of healthy action of the skin and circulation—woolen clothing best secures this object—as we have seen that it best secures friction and warmth.

Besides the material of clothing—its *cut* also is of much importance. In warm climates, where clothing is less of a necessity, the loosest garments are the best; but, in those latitudes where a certain amount of warmth has to be furnished by clothing, the garments must be worn more closely fitting. We have already likened the human body to a steam-pipe jacketed, where this steam is constantly in an ascendant motion; the faster this circulation takes place, the more the skin is cooled; and it, therefore, follows that the most regular and constant evaporation is maintained by close fitting garments.

*Flannel*, worn next the skin, should *not be used to sleep in*, but it is suited to the needs of those who labor out of doors during great extremes of temperature. Light-colored clothes are better for both winter and summer; retaining the heat in winter, and protecting from it in summer; they also protect better against contagion in the sick-room, or the miasms of unhealthy neighborhoods.

Clothing should be frequently changed and cleansed, and dark-colored clothing should be even more care-



fully examined, from its liability to conceal dirt or other excreta.

Summer clothing should not be put on too soon; or winter clothing too late. Thin-soled, or high-heeled boots and shoes are often destructive to health. *High-heeled* boots should only be mentioned in execration. They produce troublesome corns, bunions, inflammation of the ligaments of the ankle-joint, and of their sheaths, and even dislocation of this joint; beside a change of the inclination of the pelvis, and a consequent unnatural gait. *Tight-lacing* is now, fortunately, only practiced by the weak-minded.

The clothing of children, whose feeble frames are less able to resist cold than those of adults, is generally insufficient. When a baby is divested of its long clothes, it is in danger of being insufficiently clad; the danger increasing when it can run alone, and is more exposed to atmospheric influences. It cannot be too strongly impressed upon those who have the charge of children, that the practice of leaving those parts exposed which when grown up we find it necessary to clothe warmly, especially the arms, lower limbs and abdomen, is a frequent cause of retarded growth, mesenteric disease, Consumption, etc. Insufficient warmth of body, whether in children or adults, renders the person more susceptible to the invasion of disease.

## IX. BATHING.

It is an error to insist upon a daily bath for all persons. But few have such an amount of vitality as to be able to endure the shock of a daily cold bath, for years, without detriment of health, and shortening of days; and most per-

sons will find it better to discriminate in the use of the bath. A daily bath, to persons in health, in warm weather, is desirable. But, for most persons, a bath three times a week is better, and fully meets the demands of the system in keeping the pores of the skin open and the capillary system in a healthy condition. In warm weather, baths may be taken at the natural temperature of the water; and in cooler weather the chill should be taken off, and the bath itself should be of shorter duration. In general the temperature should range between 60° and 70° Fahrenheit.

Cold bathing should not be practiced when the body is cold or cooling, or exhausted by exertion or fatigue, or if the system is naturally too weak; or when the skin feels chilly. A bath should not be taken too soon after a meal, nor should the time spent in the bath be too long; from 5 to 10 minutes being the usual limit. Unless there be a *glow of reaction*, and hence, no subsequent chilliness and dulness, no benefit will result, but the contrary. To promote this ready reaction and returning glow of the system, the friction of coarse towels may be employed with advantage. *Cold bathing* is especially hazardous to patients, who are extremely weak, or who have any organic diseases, particularly of heart or lungs; there may, also, be some idiosyncrasy of condition of the constitution peculiar to the individual which renders frequent cold bathing undesirable. Caution is more particularly necessary in infancy, and old age. The adaptation of the cold bath to individual cases may often be determined by the following criterion:—If, after a bath, the patient remains chilly, languid, and dejected, or suffers headache, it had better be discontinued,

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and only gradually adopted; but, if the sense of cold rapidly passes off, and a glow of warmth and animation of spirits succeed and continue for some time, the cold bath is likely to be productive of good.

The *warm bath* is a great luxury, and to the feeble and exhausted frame is often very beneficial. The temperature may be varied according to the sensations of the patient, but as a rule should be that of the temperature of the blood—96° to 98°; if higher than 98°, the bath may be followed by a profuse perspiration, which weakens the system.

*Sea-bathing* is of the greatest value to convalescents from acute diseases, to those whose health has been injured by excessive work, town residence with sedentary occupation, excesses of various kinds, and in many chronic illnesses, when debility is not excessive. It should not be indiscriminate. The propriety of it depends on the health of the bather, the temperature of the water, and the motion of the sea. Adults in robust health may remain from five to eight minutes; or, if they are accustomed to bathe, they may remain so long as they feel warm. If the water is very cold or the sea is strong, less time should be allowed. Delicate persons should choose a smooth sea. Strong persons may bathe before breakfast; others only in the forenoon. Sea-bathing is prejudicial when the body is exhausted, or overheated, or cold, or rapidly cooling. Stout, plethoric persons, liable to rushes of blood, palpitation, giddiness, etc., should bathe very cautiously. Aged persons should regard themselves in this matter as invalids. Persons in feeble health and old age should only plunge into the sea, remain a minute or two, then leave it. Infants, feeble children,

and timid children are scarcely strong enough for the open sea. Injury is done to the feeble by a disregard of their imperfect reactionary power, and to the timid by disregard of the strain upon their nervous system. Warm glow and exhilaration of spirits after the bath indicate its beneficial action. On the contrary, chilliness and depression are indications of harm.

## X. THE INFLUENCE OF OCCUPATION ON HEALTH.

Sunlight and ventilation are of the greatest importance in workshops and offices, particularly where the young are employed, as we have already remarked (p. 126). Patients make better and more rapid recoveries in well-lighted hospitals; and very serious cases are generally placed on the sunny side of such buildings. If, therefore, persons are more likely to regain health in such apartments, we may fairly conclude that health will be better preserved in a large, well-lighted workshop, or office. Spacious, airy, and well-lighted offices and work-rooms for clerks, compositors, tailors, dressmakers, and others, would prevent a large amount of chronic disease. The sedentary occupations followed by book-keepers, milliners, sempstresses, tailors, shoemakers, and others, are often most unfavorable to health, because the sitting posture is generally combined with an inclination forwards, so as to compress the chest and stomach. Abundance of healthful recreation in the open air is the best corrective of the injurious consequences of sedentary employments.

The following list, from authentic sources, gives the general average of life among certain classes:

Of 100 Clergymen	42	attained the age of 70 years and upwards,
“ Farmers	40	“ “ “
“ Commercial Men	35	“ “ “
“ Military Men	33	“ “ “
“ Lawyers	29	“ “ “
“ Artists	28	“ “ “
“ Teachers	27	“ “ “
“ Physicians	24	“ “ “

The first half in the above list, with the exception of the clergymen, are necessarily much exposed to the air, and take physical exercise; but the other half, with the exception of the physicians, are chiefly confined in-doors, engaged in sedentary occupations. Literary pursuits are generally favorable to longevity. Physicians are short-lived, from their irregular lives, frequent exposure and the excitements attendant upon their practice. The best possible condition favorable to longevity would be a certain number of hours devoted to study, and in-door work; and, an equal or larger time devoted to riding, or out-of-door exercise. The circumstances which render occupations unhealthy are, deficiency of daylight and pure air; a bad posture of the body during employment; and the inhalation of poisonous substances, or dust, producing irritation of the lungs.

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# The Nursing and Care of the Sick.

## THE SICK-ROOM.

1. The apartment should be tolerably large; and, if possible, with a southern exposure; neither apt to be unduly heated by the rays of the sun, nor rendered dull from its absence. It should be capable of being *well-lighted* and *ventilated*. Patients cannot always be cared for in rooms which answer all these requirements; but, whatever its defects, the *ventilation* of the sick-room, whether by window, door, or fireplace, must be as thorough as possible—but *no draughts!* The room should have a fireplace with a good fire in cold weather, and open in warm weather to assist ventilation. During infectious diseases, besides diluting the poison with plenty of atmospheric air, *dilute carbolic acid*, may be freely used as a disinfectant;\* and the room should

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\* A solution should be frequently sprinkled about the floors, bed-clothes, handkerchief, etc., and be diffused through the room by a spray-producer: it acts quickly as an efficient disinfectant. It may also be used for personal disinfection—a point often but indifferently carried out—by adding it to the water in which the patient is washed, and is a valuable substitute for aromatic vinegar. It also makes an excellent gargle, for fever patients, to sweeten the breath. It is also useful to *visitors of the sick*, to prevent the risk from infectious diseases; for this purpose, a few drops should be sprinkled on the



also be divested of all unnecessary furniture, such as carpets, window and bed-hangings, etc.

2. The room should be provided with an *extra* bed, or some convenient couch, to which the patient should, if possible, be removed for a short time at least once in the twenty-four hours. This allows the bed to be thoroughly changed and aired; ensures a change of atmosphere around the patient's body; and is an agreeable *rest* to him. It is desirable, also, to have a small room in immediate connection with the sick-room, for the nurse to sleep in, and carry on the various little operations of preparing food and medicine, without risk of annoying the patient.

The *bed and bedding* of the sick-room are of no small importance. The bed should not be too high; should be without valance, or curtains, to confine the air beneath it; and should stand at some little distance from the wall, so that the nurse can get at it from every side. It should not be in a draught, as between door or window and fireplace; and it is better that the patient should be able to lie with his back to the window. A simple hair matrass, or sacking-bottom is preferable; but, if feathers must be used, put one or two comfortables over the tick, with the linen over them, so as to make a firm, even surface. The linen of the bed, as well as that of the patient should be changed, or, at least, aired and dried by a fire, every day. This drying by the fire, dissipates the impure exhalations with

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handkerchief before entering the sick-room. The use of cologne, camphor, burnt rags, vinegar, etc., is not advisable. They merely add another smell to the one already existing, and the compound is not an improvement.

which it has previously become saturated by contact with the patient's body. It is wonderful to see how much ease and comfort is afforded to the sick by a light, cool, bed, with its coverings frequently re-arranged and made agreeable. The feverish restlessness of patients is frequently entirely removed by attention to these little comforts.

3. The apartment should be *darkened*, when the patient sleeps, or wishes to sleep; not by excluding all light and air, by closed shutters, or closely-drawn bed-curtains, but by letting down the window-shades, so as to secure a *subdued* light; and, by protecting the patient's face from the direct glare of gas, lamps, etc. Light being a stimulant of the brain, frequently causes wakefulness, and excitability in the patient, when too freely admitted to the sick-room.

4. The sick-room should be *quiet*. Silk dresses and creaky boots, the rustling of newspapers, the putting of coals on the fire,\* etc., often distresses invalids; the tones of the voice should be gentle and subdued, but whispering avoided; all unnecessary conversation and noise must be avoided. The sick should not be fatigued, or over-taxed by company, study, business or worry of any kind. If visitors call, they must not be allowed to tire and annoy the patient with long stories, uninteresting talk, discussion of the patient's disease, or narration of similar cases within their knowledge. A short, cheerful, call and pleasant face are always welcome to the sick, and a kindly interest in their case is equally so. Religious conversation is always proper,

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\* The very common difficulty of renewing coals upon a fire, or in a stove, while a patient is asleep, can be easily overcome by placing the coals in a *paper-bag*; which can then be laid noiselessly upon the fire.

when conducted intelligently and in a proper spirit; though a sick-bed is far from being the best place for this most important of the duties of life. Books may not be wholly interdicted, but the amount and character of reading should be proportioned to the strength or mental vigor of the patient. In *reading to the sick*, let it be done slowly and distinctly, so that it will not be fatiguing to them to follow the reader—so, also, of conversation.

5. The *temperature* of the room should be regulated by a *thermometer*, suspended so as to be sheltered from currents of air, and from direct heat of the fire—and should be varied according to the nature of the patient's disease. In fevers, Inflammation of the Brain, etc., 55° will be a proper warmth; in Inflammation of the Lungs, and in Bronchitis, a higher temperature—60° to 70°.—is necessary. A warm and moist air, so as not to irritate the inflamed lining of the air-tubes, is needed in all inflammatory affections of the chest. But, whatever may be the temperature—see that proper *ventilation* be maintained.

6. The sick-room should be made *pleasant* and *cheerful*, as well as comfortable. Do not suffer the sick to lay all day staring at blank walls, or at strange, unsympathizing faces; but remember that flowers, bright and *fresh*, pictures around the room; an occasional change, or re-arrangement, of furniture; or a seat or couch at the window, serve wonderfully to cheer and invigorate a patient.

In this connection, Miss Nightingale's suggestion as to the care of *food and medicines in the sick-room*, is worthy of repetition here. It is this—do not keep the food, drink, or

delicacies intended for the patient in the sick-room or within his sight. The air and temperature of the apartment are liable to hasten putrefactive decomposition, especially in hot weather, and the continuous sight of them to cause disgust. Rather take up to him, at the fitting time, and by way of surprise, two or three teaspoonfuls of jelly, or as many fresh grapes as he may consume at once, or the segment of an orange. Or, if it be appropriate to his condition, a small cup of beef-tea, covered, with one or two narrow slips of toasted-bread, just from the fire; this is very much preferable to offering even a less quantity from a basinful that has been kept for many hours within reach of the patient's hand and eye.

7. *The requirements of Contagious-disease patients, Isolation.* The sick-room for such patients should be in an upper story, to present the spread of infection to others; for infectious exhalations, being lighter than air, ascend. *Precautions.* Nurses, or mothers who, frequently go in and out of the room, should keep a loose wrapper or gown, of some smooth washable material (not woolen) hanging behind the door (outside), ready to slip on over their other dress whenever they enter, before waiting upon the infected patient, and to be taken off when leaving the room.

Outside of, and hanging down over the sick-room door, should be suspended a sheet, moistened, from time to time, with *carbolic-acid* and water (two table-spoonsful of the acid to two quarts of water), or with *Condy's Fluid*, 1 to 50; or a solution of *chloralum*—the two latter being of less pungent odor than the carbolic-acid. This is to destroy any disease-germs which may pass through the door-way.

In infectious fevers, as Scarlet Fever, etc., when the skin begins to peel, the whole body should be thinly anointed with carbolic oil (1 part to 40 of oil) which may be washed off and reapplied every day; the object being to clog the scales of skin and prevent them flying about and so becoming a source of infection. When the skin ceases to peel, the oil may be finally washed off in a warm bath of carbolic-acid and water (1 to 240, or two ounces to three gallons of water).

*Disinfection, of clothing and of room.* Soiled linen should at once be put into carbolic-acid and water (1 to 40) till convenient to wash it. In cholera, typhoid fever, and yellow fever, *all the discharges should be disinfected* by putting some carbolic-acid into the bedpan before each time of using; and the stools, etc., after being disinfected, should be buried away from wells or running water, or mixed with a larger quantity of crude carbolic-acid, say three tablespoonsful, before being sent down the water-closet. The patient should spit into a vessel of carbolic-acid, and all dishes used by him should be disinfected either by boiling water or carbolic-acid.

After the disease is over, the sick-room and contents must be thoroughly disinfected. All *blankets, books, and small articles* should be baked two hours, at a temperature of 250° F.; this may be done by putting them in a wooden box into an ordinary oven. The *patient's linen*, after being disinfected, should be scalded, or boiled, and washed. White woolen articles can be baked for two hours at 250° F. without any change except a slight discoloration like that produced by washing new flannel. The strength of texture

and warmth of blankets are not affected. Cotton, silk, linen and paper are not affected by a considerably longer baking. At 300° F. white woolen articles are singed, and colored wool loses its color, but its strength is little affected in appearance. When *hair mattresses* are baked they should be allowed to stand for two days before making up again, so that they may recover their natural moisture and not cause dust. The *furniture and accessible parts of the room* can be more thoroughly disinfected by disinfectants, in the shape of fluids;—such as carbolic-acid, permanganate of potash, chloride of zinc, chloralum and boiling water, which are the most common;—carbolic acid, however, being neutralized by most of the fluid disinfectants, should always be used by itself.

*Final Disinfection of the room itself.* Remove all bright steel or metal articles from the room: paste up all crevices and the chinks of windows, fireplaces, etc., with paper. Put a bucket of water in the middle of the room, and lay the tongs across it, and on the tongs an iron lid, or dish, with two pounds of sulphur in it, set fire to the sulphur, and shut the door for the night. Any disinfectant vapor so weak that it can be breathed even a single instant is of no use; hence it is useless to expose saucers of carbolic-acid or bleaching-powder in the sick-room; the vapors merely annoy the patient and do no good.

Next day the floors should be washed and scoured or scalded, if practicable. The walls should be lime-washed—or, if varnished or “hard-finished,” washed with soap and water. If papered, the room should be re-papered. Bedstead and furniture should be scalded, or washed with car-



bolic-acid, soap and water. Finally, the door and windows should be left open for a couple of days. This done—and all danger of further infection is at an end.

8. *The Nurse.* The services of an intelligent, experienced nurse form a most important part of the treatment of disease. Goodness of heart, a kind and obliging disposition and good sense, are indispensable requirements in a nurse. Medicine—in some cases—can play but a secondary part in the cure of the sick; but good nursing, or care, always plays a prominent part. The object of nursing is to place the system of the patient in the best possible condition for the beneficial action of medicine. It can easily be understood, therefore, that a good nurse is the right arm of the physician, and that a poor one may negate and defeat all his efforts. While the nurse should be all attention to the wants of the sick, yet she should avoid “fussiness” or wearying the patient with unnecessary trifles. She should go calmly and quietly about her business, doing cheerfully what is necessary to be done, while yet she does not make herself the conspicuous subject of the occasion. She should dress in quiet, neutral colors; bright colors are distressing to the eye, while black is depressing, and may be the traditional “last straw.” There is an evil which cannot be too severely condemned. It is the rage to prescribe for the sick, possessed by almost every body, under every conceivable variety of circumstances. No matter how severe the disease, or how urgent the emergency, nine out of every ten persons who call, will tell precisely what will cure the patient, and the remaining person has a doctor just on hand to do the work. Usually, the more ignorant the

volunteer, the more positive they are of a cure. They who know much speak cautiously. Those who know little are very positive. Now, if a physician is in attendance, it is his business to prescribe and not that of others, and it is a very delicate piece of business, under any circumstances, to advise the use of a medicine or a change of treatment or medical attendant. While a physician is in attendance, simple justice to him and the welfare of the sick, require that his directions should be followed, and his instructions obeyed. It must be a rare case, indeed, that justifies the interference of outsiders.

In cases of *very sick* persons, it may be advisable to call in assistance of watchers, but it should be avoided if possible. Better, far, have some members of the family take turns in watching, and the one in charge near at hand to be called in case of emergency. In a majority of cases, those that are called in as night watchers are stupid, sleepy, ignorant of their duties, or the wants or peculiarities of the patient, and do far more harm than good. Avoid them if possible. In most cases it is better for the mother,\* husband, sister, or others of the family, to lie down in the room and sleep while the patient sleeps, than to have the house and patient kept awake with watchers.

9. *Cleanliness.* The mouth should be often wiped with a soft wet towel, when there is a crust on the lips and teeth. Fears are often expressed that in washing the surface of a patient's body, or even in changing his linen, any eruption or rash should be driven in, or that cold should be taken. If done properly, there is not the least ground for any such fear. The patient should be sponged over as completely as

possible at least once a day with warm or cold water, as may be most agreeable to his feelings, and then quickly, but carefully, dried with a soft towel. If the patient be much exhausted, a small portion only of the skin may be washed at a time, and then another, and so on; or, instead, first a damp and then a dry towel may be used under the bed-clothes, so as to disturb the patient as little as possible. When there is delirium or apathy, the bladder must be emptied, *at least*, twice in 24 hours, and the nurse must see that it is so emptied, lest mischief be done by the retained urine.

### ACCESSORY CURATIVE MEASURES.

There are certain expedients or curative measures, which may often be resorted to by nurse or invalid, which, while they can scarcely be called parts of medical treatment, yet are of so great value, nay, so very indispensable in some cases, as to demand particular attention in a treatise on domestic medicine. Among these are, especially, the use of *warm baths*, of *poultices* and *fomentations*, and of the *injection-pipe*.

*Warm baths.* The *warm bath* (92° to 98° F.), and the *hot bath* (98° to 112° F.), are remedial agents of great value in many affections.\* They tend to equalize the general temperature of the body, to soothe the nervous system, to

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\* For the correct or safe administration of warm baths, a bath-thermometer is indispensable. The hand is a very imperfect guide. In the absence of a thermometer, the nurse should uncover her arm to the elbow and immerse it in the water, as the skin of the elbow is *thin* and sensitive to any excessive degree of heat

control the action of the heart, to promote perspiration, to relax the muscular and cutaneous system, and, especially—by recalling to the surface disproportionate accumulations of blood in the internal organs—to equalize its distribution throughout the body. All severe inflammations and congestions are preceded by a cold chill or rigor, during which the hands and feet become cold, the head often hot, and a shivering chill extends, often with chattering teeth and blue nails, over the whole body, lasting from a few minutes to an hour or more, and is succeeded by heat and high fever. It is in this initial stage of disease that the judicious use of some form of warm bath averts the danger of local congestion, and by breaking the chill, breaks also the force of the disease.

In the diseases of children—*Convulsions, Spasmodic Croup, Measles, Scarlet Fever*, etc., also in *Scarlatinal Dropsy, and Fevers*, the warm bath is of the greatest benefit. It also aids the cure in *Inflammation of the kidneys, bladder and uterus*; at the *grand climacteric* of women, a general warm bath, for forty or fifty minutes, once a week, cures or prevents many of the ailments incident to the period, by promoting free action of the skin. In *Spasmodic Stricture of the Urethra*; in the passage of *renal and biliary calculi*; in *Colic* and many spasmodic affections of the bowels; in *Tetanus, Prurigo, Diabetes, Bright's Disease*, and in the *Melancholy of Insanity*, it is often of signal service.

The following list of the *permissible limits of temperatures* of various kinds of baths, may be of use:

The cold bath	50° F.	to	70° F.	Vapor Baths.
“ tepid	“ 85° F.	“	92° F.	90° F. to 100° F.
“ warm	“ 92° F.	“	98° F.	100° F. “ 105° F.
“ hot	“ 98° F.	“	109° F.	115° F. “ 130° F.

*Vapor baths* are chiefly of use for *Gout*, *Rheumatism*, *Skin-diseases* and *commencing colds*. One may be extemporized by tying a tube over the spout of a kettle and fastening the other end in a small basket tied under a cane-bottomed chair; the patient sits on the chair, and is covered, chair and all, with a couple of blankets pinned around the throat, and down the front to the floor. During the bath, one or two glasses of cold water may be sipped; and headache, if present, may be allayed by cold sponging, or a cold wet cloth laid upon the head. After perspiring for 10 or 15 minutes, the patient may be quickly dried and got to bed.

The *hot foot-bath* is, perhaps, the most common and useful of hot baths, but some care and knowledge should be exercised in order to derive the greatest amount of benefit from it. The vessel should be large and deep enough to permit the water to come well up towards the knees. The temperature of the water should be such that the feet can be kept in it without inconvenience, and another vessel of hot water should be at hand, from which, as the water becomes cooled in the bath, the hot water should be, from time to time, supplied, so that the temperature may be gradually increased during the entire bath. This should be continued from ten to twenty minutes, according to the circumstances of the case, or until the patient is relieved, the chill broken, or a general perspiration appears. Then let the feet be taken from the bath, wiped rapidly dry, with warm cloths, and wrapped up comfortably, so as to retain the heat. This kind of bath promotes general perspiration, corrects or relieves *Catarrh*, *fever*, etc., in the incipient stage; is very useful in the sudden *Suppression of the Menses* during the

flow, from exposure to cold or wet; relieves *Headache, Palpitation, hysteric choking, Piles*, etc.

*Sitz-baths* may be administered in a tin bath, formed for the purpose, with a back; or a very serviceable one may be made, by cutting down an ordinary barrel, with a board set in it for a back. The patient sits down in the tub, with water sufficient to come well up around the hips and over the lower abdomen, and is then covered from the neck down over the tub so as to retain the vapor, if desirable. The bath may be continued from ten to thirty minutes. In cases of *congestion to the lower abdominal organs, Piles* and in some severe cases of *Dysentery*, these seat-baths will be found of great value.

*Poultices* are used to apply heat and moisture to the skin, when it and the underlying structures are inflamed. They effect this by relaxing the tension of the parts and promoting perspiration. Almost any soft substance which will retain heat and moisture, such as *bran, bread, charcoal, linseed, mashed potatoes*, etc.\*, may be used for the making of

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\* *Linseed-Meal Poultices*.—Boiling water should be poured into a heated bowl, and into this the meal quickly sprinkled with one hand, while the mixture is constantly stirred with a knife or spatula with the other, till a thin smooth dough is formed. If the water be added to the meal, little knots are apt to collect. The dough should be quickly spread on warmed linen already cut to the required shape, or put into a bag, and applied. Linseed-meal retains heat and moisture for a long time, but is liable to irritate delicate or inflamed skin.

*Bread Poultices*.—Put slices of bread into a basin, pour over them boiling water, and place by the fire for a few minutes, when the water should be poured off, replaced by fresh boiling water, and this again poured off, and the bread pressed, beaten with a fork, and made into a poultice. Bread poultices are valuable for their bland, non-irritating properties.



a poultice—which should be quite smooth and free from lumps or hardness. Poultices are chiefly useful in the following complaints:—Pneumonia, Pleurisy, Bronchitis, Pericarditis, Peritonitis, Acute Rheumatism, Lumbago, and to mature and facilitate the discharge of matter in Abscesses, Boils, etc.

When used to mature Abscesses, or disperse inflammation, poultices should extend beyond the limits of the inflamed tissue; but after the discharge, the poultices should be very little larger than the opening through which the matter is escaping.

To retain heat for a long time, they should be covered with oil-silk, or a layer of cotton wool—which is preferable to having a very thick poultice, which might by its weight cause inconvenience, or pain. In acute *Lumbago*, they must be applied thick, hot, large enough to cover the affected part, and be renewed immediately they become cool. After continuing their use for from one to three hours, the skin should be wiped dry and covered with flannel, and this again with oil-silk.

*Fomentations*, by means of flannel wrung out of hot boiling water, are used for purposes similar to poultices, but

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*Charcoal Poultices*.—Uniformly mix charcoal with bread poultice, and just before the application of the poultice sprinkle the surface with a layer of charcoal. Or charcoal may be sprinkled on a wound or ulcer, and a simple bread poultice applied over it. Charcoal poultices correct offensive smells from foul sores, and favor a healthier action.

*Carrot Poultices*.—Boil carrots quite soft, mash them with a fork, and apply in the ordinary way. They are said to make wounds cleaner and healthier.

are lighter and less likely to increase the pain of sensitive parts. The hot flannel is placed in stout towelling and twisted around, till as much water as possible is squeezed out; and, if well wrung, can be applied very hot without danger of scalding. When it loses its heat, it should be quickly and deftly replaced with another hot one. In Inflammations, Spasms, and pains affecting deeply-seated structures, as in the chest or abdomen, and in sprains, etc., great relief is often gained by their use.

*Dry Fomentations.*—When heat alone is required, and it is desirable to avoid the relaxation of tissues which moisture would occasion, *dry* heated substances—flannel, bran, chamomile flowers, salt, sand, etc.—are used. After thoroughly heating the substance, it should be placed in a bag made for the purpose, and which has also been previously heated. Sometimes, as in Spasm and its accompanying pain, a thin piece of flat tile, or a plate, heated in an oven, and wrapped in warmed flannel, may be employed. For mere evanescent heat, flannel, strongly heated before the fire, may suffice.

*Injections.* Most important—indeed, indispensable—for every family, is the use and knowledge of the *injection-pipe*. The best are of rubber, with flexible tube and bulb, containing the pumping apparatus in the centre, from which the suction tube extends a foot, or more, to the reservoir or dish containing the charge. The injection is usually lukewarm water. Sometimes, to a pint of water, a large spoonful of molasses is added; and, if a more active injection is yet required, a tablespoonful of salt may be supplied. Very generally simple tepid water is sufficient. The end of the

tube should be covered with oil, cerate, or lard, and then introduced, by gentle manipulation, into the rectum. If the object is to dislodge hardened feces, the pipe should be inserted, so as to place the water *above* the hardened mass. The pumping should then be continued (*slowly and steadily*) until a pint, quart, or even double that quantity of fluid, has been thrown up. The patient should, if possible, lie down and retain the injection 10 or 15 minutes. Should one injection not succeed, it may be repeated after a half hour or more, until the object is obtained. In cases of obstinate constipation, a morning injection, with the use of the appropriative REMEDY, is beneficial. In violent and obstinate *Colic*, a large injection often fully relieves—also, in *pains in bladder, Womb and Kidneys*. *Starch water*, tepid, injections of the consistence of cream, and about two ounces in amount, are sometimes very efficacious in checking *diarrhea*; also, in *Dysentery, Consumption and Choleraic diarrhea* of Children. *Salt* injections, a dessert-spoonful to the pint or half pint of water, are excellent for dislodging thread-worms—but, as in other, cases treatment is necessary to correct the constitutional condition on which the disease depends.

In all cases of *fever* and threatened *convulsions* in children, arising from hurtful or indigestible food—fruit, cake, raisins, oranges, etc., the proper use of the injection-pipe, in connection with the medicines, will save the patient—is never hurtful, and is a far better expedient than the use of pills, cathartics, or even such laxatives as castor oil.

*Inhalation*, is the act of drawing air, impregnated with

the watery vapor of medicinal substances, into the air-passages. *Quinsy, catarrhal and ulcerated Sore-throat, chronic Bronchitis, Phthisis, etc.*, may be more or less benefited by inhalation. The method of inhaling is very simple, and is often done quite effectively, and with less effort, without a special inhaler. All that is required is a jug of *hot* water, over which the face may be held, and a towel so arranged that it covers the face below the eyes, and surrounds the top of the jug, so as to confine the vapor. A few drops of the drug to be inhaled being dropped into the hot water, the medicine finds ready access to the air-passages through both the mouth and the nose. This may be practised for five or ten minutes at bed-time; and, if necessary, and the patient has not to be exposed to cold air during the day, it may be repeated once, twice, or oftener in the day. In acute inflammatory diseases of the throat, simple or medicated vapor may be administered as frequently as the patient's strength and other circumstances permit. A portion of the drug thus administered reaches the lungs and enters the general circulation; but the chief action of the medicated vapor is on the throat and bronchial mucous surface.

In grave, penetrating diseases, *Diphtheria, Croup, etc.*, where it is desired to keep the atmosphere of the room moist, vapor may be diffused through the apartment, by the steam from a large kettle with a long spout, kept constantly boiling; or, by forming a tent over the bed and covering it with blankets, and then bringing a pipe to convey the steam from the kettle under it.

In urgent cases, where suffocation threatens, the room

may be quickly filled with vapor, by hanging wet towels before a *hot* fire. In ordinary cases, simply keeping water boiling in the centre of the room will sufficiently moisten the atmosphere.

### DIET OF THE SICK.

HOMEOPATHY is *not*, as is so often asserted by its opponents, “a system of diet”—but of medical treatment. Remedies, chosen according to the homeopathic law, are but little affected by the food or beverages ordinarily taken; so that, beyond the prohibition of certain articles of diet which disagree with the patient, interfere with the bodily functions, or impose upon weak, or diseased, organs a task to which they are unequal, there is but little need to restrict the patient’s food.

The Regimen of the sick, under Homeopathic treatment, may, therefore, be reduced to two simple rules, 1. *avoid* all articles of drink or food that are *medicinal*, and those that are *irritating*, *indigestible* or *injurious* to the sick; and 2. to use only such as are *light*, *easily digested* and *nourishing*, and *satisfy the appetite and thirst*.

ALIMENT ALLOWED—Wheaten Bread, Graham Bread, Arrow Root, Sago, Tapioca, Farina, Corn Starch, Rice and Milk, Panada, Hominy, Mush, Wheaten Grits, Custards, Beef, Mutton or Lamb Chops, Lean part of Ham, Venison, Chickens, Poultry, Rabbits, and all Game, Calves’ Foot Jelly, Chicken Broth, Fresh Eggs, Scale Fish, Fresh Oysters, Ripe Potatoes, Apples, Baked or Stewed, Strawberries, Raspberries, Grapes, Ripe Sweet Apples.

DRINKS ALLOWED—Water, Toast Water, Barley or Rice

Water, Gum Water, Gruel, flavored or sweetened with Fruit Syrups, Milk, Cocoa, Chocolate, Weak Black Tea or Barley Coffee, sweetened with Milk and Sugar if desired.

AVOID—Coffee, Highly Spiced or Fat, Heavy, Indigestible Meats, Sausages, Mince Pies, Salt Fish, and Stimulants, unless allowed, by attending physician.

These few hints, together with a careful reference to, and study of our chapter on “Nutritive Food Values” (pages 49 to 104) will sufficiently guide those who have charge of the sick.

## HOW TO INTERPRET THE SIGNS AND SYMPTOMS OF DISEASE.

The various evidences of an unhealthy action of the system, can only properly be estimated at their full value by the trained and skilful physician. Yet careful observation and common-sense, applied to the examination of *tongue, pulse, temperature, skin, urine, etc.*, will do much to assist even laymen in forming a tolerably accurate idea of the nature and severity of diseases which they may have to treat. To such the few following brief hints may be of value.

1. THE PULSE is the stroke or beat of an artery, caused by the wave of blood forced onwards from each beat of the heart. It is usually best felt on the radial artery, just above the root of the thumb and the joint of the wrist, by slightly pressing the first two fingers on the front of the wrist at that point. The natural pulse in the adult male is between 60 and 70 beats per minute. It is quicker in the morning



than at night, reaching its maximum about noon and its minimum about midnight; in old age the pulse becomes hard, owing to increased firmness or to structural change in the arterial coats. The average number of beats of the healthy pulse in the minute, at different ages, is as follows:—At birth, 130 to 140; during infancy, 120 to 130; three years old, 90 to 95 or 100; five years old about 88; ten to fifteen years old, about 78; above fifteen, 65 to 75; in old age, 65 to 70; decrepitude, 75 to 80.

The pulse is influenced, however, by the following and other conditions, which should be considered in estimating the character of the pulse as a diagnostic sign. It is faster in the female than the male, by from six to fourteen beats; but this difference only occurs after about the eighth year. It is quickened by warmth and heat; by rapid breathing; by bodily exertion or mental excitement; it is more frequent in the morning, and after taking stimulants or food; it beats faster standing than sitting, and sitting than lying; but it is retarded by cold, sleep, fatigue, want of food, and by certain drugs.

In examining the pulse, the points to be noticed are: 1. *Frequency*, or number of beats per minute; 2. *Fulness*, or volume; 3. *Strength* of beat; 4. *regularity*, or rhythm of beat; 5. *Resistance* to pressure of finger. A *strong, quick* pulse is suggestive of inflammation; a *quick* and *weak* one of fever or weakness; a *slow* and *strong* one of pressure on the brain; and a *slow* and *weak* one of shock, depression, jaundice,—but allowances must be made for those sudden irregularities which are often observable under transient excitement or temporary depression, especially of nervous persons.

2. THE TEMPERATURE. In all cases of illness, it is as important to *measure the heat* of the body, as to count the pulse, or the breathing. The use of the clinical thermometer aids in arriving at definite conclusions, relieves much mental anxiety, and affords a clue, in many cases, to the disease, even before its characteristic symptoms have declared themselves. In temperate regions the normal heat of the human body, at sheltered parts of its surface, is 98.4° Fahr., or a few tenths more or less; and a persistent rising above 99.5° or a depression below 97.3° Fahr., are signs of some kind of disease. The maintenance of a normal temperature, within the limits above stated, gives a complete assurance of the absence of anything beyond local and trifling disturbances; but any acute disease unnaturally elevates the temperature or animal heat, and many diseases are thus indicated some time before they could be detected by any other means. It enables us to diagnose decisively between an inflammatory and a non-inflammatory disease; and to determine the severity of the inflammation. *Hysteria*, it is well known, often simulates inflammatory disease; but the temperature of hysterical persons is *natural*, whereas that of persons really suffering from inflammation is *always raised*.

In *acute fevers*, the thermometer affords the best means of deciding in doubtful cases. Thus, in *Typhoid fever*, the rise of temperature, or its abnormal fall, often indicates what is about to happen one or two days before any change in the pulse, or other sign of mischief, may be observed.

In *Consumption*, the thermometer affords us most valuable diagnostic information, especially in the early stage of

the disease, when treatment is likely to be of greatest avail. During the deposit of tubercle in the lungs, or in any organ of the body, the temperature of the patient is always raised from 98°, the normal temperature, to 102-3°, or even higher, the temperature increasing in proportion to the rapidity of the tubercular deposit. In *Measles*, the thermometer is almost the only means of learning at an early stage the complication of *Pneumonia*. In *Ague*, several hours before the paroxysm the temperature of the patient's body rises considerably. In *Acute Rheumatism*, a temperature of 104° is always an alarming symptom, indicating grave complication, such as involvement of the valves of the heart. In short, a temperature of 104° to 105° in any disease, indicates that its progress is not checked, and that complications are liable to arise.

In all cases of convalescence, delayed decrease of temperature in *Pneumonia*, the persistence of a high evening temperature in *Typhus* or *Enteric fever*, or in the eruptive diseases, and the incomplete attainment of normal temperature, are of great significance.

The onset of even a slight elevation of temperature during convalescence is a warning to exercise renewed care over the patient, especially in the maintenance of a due control over his diet and actions.

We recommend a straight, self-registering 4-inch thermometer; with a scale; (it will be best to have your family physician procure one for you, and give you a few directions how to manage it), and that observations should be made with it regularly, noting, at the same time—the pulse and breathing. The best way to “take a temperature” is by

placing the bulb of the thermometer under the tongue, by the side of the "second wisdom tooth," requesting the patient to close the lips around the stem. It is frequently placed, also, in the armpit, and sometimes in the bowel—and in every case should be allowed to remain *in situ* five minutes.\* The most suitable time for taking temperature is from 7 to 9 A. M., and from 5 to 7 P. M.

In connection with this we may note that the *pulse* is usually increased by about 8 beats per minute for every degree of temperature over the normal 98.6° F.; thus, if the pulse is 72 with the temperature at 98.6°, it will be 80° when the temperature is 99.6°, and 88 when the temperature is 100.6°.

3. RESPIRATION, (breathing). In ordinary health the number of respirations in a minute is from 15 to 20, or one breath to every four beats of the pulse; but it is largely increased by exercise and various diseases, in which it often forms an important sign both as to its frequency and fullness. During sleep and in a few diseases the frequency is diminished; if much diminished it is generally an unfavorable sign. Expiration is longer than inspiration.

The points to be noted are: 1. the *frequency* per minute; 2. whether respiration is performed chiefly by the ribs (thoracic) or by the muscles of the belly (abdominal); 3. if the breathing is calm, easy, and fully drawn, or if it is short, hurried, forced, or incomplete; 4. if it causes pain, or is checked by cough.

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\* The temperature of the tongue is 4-5 of a degree; and that of the bowel 1.1-5 of a degree warmer than that of the armpit.

4. THE TONGUE affords important indications:—*Dryness* points to diminished secretion, and is common in acute and febrile diseases; *moisture* is generally a favorable sign, particularly when it succeeds a dry or furred condition. A preter-naturally *red tongue* is common in the course of the eruptive fevers; in Gastric and Bilious fevers, and in bad cases of Indigestion, the redness is often limited to the edges and tip. The “*strawberry*” tongue is a symptom of Scarlet fever; the “*fissured*” tongue of Typhus and Enteric fevers. When the tongue is *livid* or *purple*, there is defective oxygenation of the blood. The *furred tongue* is the most marked, and is common in inflammation and irritation of the mucous membranes, in diseases of the brain, in all varieties of fever, and in almost all acute and dangerous maladies. Some persons have usually a *coated tongue* on rising, without any other symptom of disease. This is especially the case with tobacco smokers. A *uniformly white-coated* tongue is not very unfavorable; a *yellow coat* is indicative of disordered action of the liver; a *brown or black*, of a low state of the vital powers, and contamination of the blood. The *gradual cleaning* of the tongue, first from the tip and edges, shows a tendency to health, and indicates the cleaning of the whole intestinal tract; in less fortunate cases, as the tongue gets browner, dirtier, and drier, each day, the nervous and muscular systems get weaker, and hope is gradually extinguished; when the fur separates in patches, leaving a red, glossy surface, it is also unfavorable; when the crust is rapidly removed, leaving a raw or dark-colored appearance, the prognosis must still be unfavorable.

5. PAIN is often a most important indication of the nature

and seat of disease, pointing to an interruption of the harmony of the bodily organs; and homeopathic physicians insist most strenuously that the distinctive characters of the various kinds of pain, should be described as accurately as possible by the patient. When attended with a throbbing sensation, consequent upon the heart's action, it is called *pulsating pain*; when with a feeling of tightness, *tensive*; when with heat, *burning*. *Nervous* pain may be recognised by its disposition to follow a certain course, without being rigidly limited to one particular part; by its being subject to perfect intermissions; and by the suddenness with which it comes and goes. *Spasmodic* pain is mitigated by pressure, by frictions, and by applications of heat; it comes on suddenly with greater or less severity, terminating abruptly. *Inflammatory* pain is constant, attended by heat and quickened pulse, is increased by movement of the affected part, by touch or pressure, and usually mitigated by rest. Frequently pain occurs, not in the part diseased, but in a distant one. Inflammation of the liver generally first shows itself by pain in the right shoulder; inflammation of the hip-joint, by pain in the knee; stone in the bladder, by pain at the end of the penis; disease of the heart, by pain down the left arm, etc.

6. THE SKIN,—in health imparts to the touch the sensation of an agreeable temperature, with just sufficient moisture to preserve its softness; it is also elastic, smooth, and neither too tense nor loose. A *harsh, dry, burning heat* of the skin is indicative of fever, and must be regarded as unfavorable, especially in inflammatory conditions of internal organs. If this condition be followed by *perspiration*,



coincident with general improvement, it is a favorable indication. Great relief is usually experienced on the occurrence of the sweating stage in Ague, Inflammatory fevers, etc. On the other hand, complications may be feared if perspiration ensue without any amelioration of other symptoms.

Partial or local perspirations indicate a deranged condition of the nervous system, or an affection of the organs beneath the perspiring surface. If perspirations occur after trifling exertion, they point to excessive weakness. Night sweats, of frequent occurrence, not only show debility, but when preceded by chills and fever, indicate a hectic and consumptive state of the constitution.

The *color* of the skin is also diagnostic. A bluish tint of the skin indicates structural disease of the heart. A yellow color points to biliary affections. A rich blush of the cheeks, especially if it be circumscribed, and the surrounding parts pale, indicates an irritable condition of the nervous system, or a diseased state of the lungs.

7. THE URINE.—The urinary organs are,—the kidneys and bladder, with their appendages. The kidneys secrete the urine from the blood, and by this process the blood is relieved of many impurities, which if retained would give rise to disease in the whole system. The secretion of the kidneys reaches the bladder through little channels (*ureters*), and the urine is ultimately discharged through the urinary canal (*urethra*).

*Healthy urine* is of a brightish yellow or amber color, a tint darker in the morning than in the afternoon, yielding a slight ammoniacal smell, devoid of unpleasant odor, and

precipitating no deposit on standing, or only the merest trace of mucus, or of urates from a low temperature. In advanced age the urine becomes darker and slightly offensive; it is darker in persons who lead a very active life; different varieties of food also produce a marked effect both on the color and odor of urine. The stream of urine should be round and large, and it should be passed about four to six times in twenty-four hours without any pain or straining.

The average *specific gravity* of healthy urine is between 1,020 and 1,025, being in excess of water, which is the standard (1,000); and the normal quantity in adults about forty ounces in the twenty-four hours. A urinometer indicates the specific gravity.

In *disease*, the urine presents many varieties, and furnishes valuable indications. Thus, it may be of a dark yellow or saffron color, as in Jaundice, or derangement of the liver; it may be red or high-colored, and scanty, with quickened pulse, as in fever; it may be bloody or slimy, as in affections of the kidneys or bladder; pale and copious, as in nervous and hysterical ailments; it may be heavy, muddy, or of a purple color, showing an unfavorable condition of the system; or dark or black, indicating putridity. The urine may be passed too copiously or scantily, with pain, with effort; or it may be retained with difficulty. There may be a frequent or uncontrollable desire to micturate, with burning or scalding pain; or the pain may be only experienced in passing the last few drops; in either case local inflammation is indicated.

The specific gravity of urine in Bright's disease is 1,015 to 1,094; diabetic urine, 1,025 to 1,040; in Hysteria it may be as low as 1,007.

In Rheumatic fever, Gout, etc., the urine is abnormally acid; while, on the contrary, a loss of nervous power sometimes causes insufficient mucus to be secreted, so that, decomposition having taken place, the urine is found to be alkaline. Heat will produce a deposit in acid urine, but not so in alkaline, however large a proportion of albumen it may concern. The microscope enables us to detect casts

of tubes, etc., but it should be remembered that many substances may have found their way into the vessel, as fibres of deal, flannel, or cotton, etc., which bear a sufficient resemblance to be mistaken for the above.

When urine has to be examined, a little should be taken from the whole quantity that has been passed during twenty-four hours, as it varies greatly in its properties at different periods of the day; and after food.

## BLOOD PRESSURE.

The force exerted by the heart during contraction upon the circulation and the pressure of the contained blood in the arteries or arterial tension may be accurately measured by the sphygmomanometer. In this instrument the blood pressure is measured against a column of mercury in terms of millimeters. In normal adults under 40 years of age the blood pressure varies from 110 mm to 130 mm. It varies morning from night, before or after eating. Is increased by muscular or mental work, or by anxiety, grief, anger or other emotional conditions. Most diseases are indicated by increased blood pressure. Oftentimes increased or high blood pressure is the first indication of serious disease. Lessened blood pressure, below normal, is found in anaemia and in cases of toxic poisoning. In children the pressure is less than in adults. After 40 years of age there is a gradual increase in pressure, 140 being the normal at 60 years, steadily increasing with advancing years. High pressure may indicate cardiac or renal disease and is always found in arterio-sclerosis. Often high pressure or tension is found in men who work, smoke or drink hard and are otherwise in good health, though this condition of good health cannot last long, as changes in the arterial coats are sure sooner or later to occur. Everyone arriving at the age of forty years should have their blood pressure taken by an experienced physician and the elasticity of the arteries determined.

## How to select, prepare and take the Medicines.

In general, and for slight affections, after having first looked over or read the MENTOR, a glance at the indications will be sufficient to show from what particular vial the medicine is to be taken for any particular disease or symptom. Yet, if more than a single dose is required, it will be well to read over, in the MENTOR, the description of the disease or affection which is supposed to be present.

After having read the directions carefully, and selected the proper REMEDY, if the directions are to take the medicine dry, then take six of the pellets from the vial into the hand, or a spoon, and thence into the mouth, and let them gradually be dissolved, without being chewed, or swallowed whole like pills. It is a bad way to turn the vial against the tongue, or into the mouth, as the breath contaminates and dissolves the pellets.

Also, it should be recollected that the power of a given dose of medicine is INCREASED by *being dissolved*, or spread over a larger surface; so that *two small pellets* thoroughly dissolved in a spoonful of water is a more powerful dose than *six pellets* taken dry.

If the Remedy is to be taken in *fluid* form, dissolve twelve pellets in six dessert-spoonfuls of pure spring or well-water, by crushing and stirring the medicine until it entirely disappears. (For grown persons a table-spoonful, and for children or infants a dessert or tea-spoonful is a proper dose.)

Two NUMBERS may often be given in alternation, that is, first one, then after the proper interval, the other, and so on. Where REMEDIES are to be thus given, let each be prepared according to the above directions, remembering that each glass has its separate spoon and cover; and it will be even better and safer to prevent mixture or confusion; if each tumbler has a label affixed to it, bearing the NUMBER which it contains.

This alternation of remedies is a favorite mode of treatment, and may be resorted to when all the symptoms do not seem to be met by one remedy; or, when really two diseases may be present at the same time, as for instance: cough and fever; catarrh and dyspepsia; leucorrhea and constipation; headache and dyspepsia. In such cases the two REMEDIES may be given alternately with advantage.

When we can do so, it is preferable to give a single REMEDY. In cases where some symptoms does not seem to be within the range of the remedy, yet by using it a few days, the symptom or complaint often disappears with the main disease.

The best time for taking medicine is in the morning on rising and washing the mouth; and, at night on retiring to rest.

## REPETITION OF DOSES.

The repetition of doses depends much upon circumstances. In acute diseases and in urgent cases, the REMEDY acts best when dissolved, and a spoonful given every fifteen minutes, half-hour, hour, two or four hours, according to the urgency of the case, always bearing in mind this rule, to *diminish the frequency of the doses in proportion as the patient improves*, and to discontinue the Remedy altogether as soon as entire relief is afforded. In most cases of chronic disease, a dose morning and at night will be sufficient, or at most, three or four times a day. In very many cases a dose once per day is quite sufficient, and better than if more frequent. It is not the quantity or frequency of doses so much as the appropriateness of the remedy which cures the patient; and if a small quantity will not cure, there is but little hope of a large one.

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# Disease and Treatment.

## FEVERS.

Fevers have usually a precursory stage of some days, consisting of depression, pain in the limbs, headache, coated tongue, turns of vertigo, loss of appetite, or general lassitude. After this there is either a cold chill or chilliness for a day or two, which is followed by high fever, with headache, sleeplessness, often delirium, full, quick, hard pulse, quick respiration, vertigo on rising or sitting up, sometimes vomiting, costive bowels etc.

This stage continues some days, depending upon the character of the fever and treatment, after which, in favorable terminations, the pulse by degrees abates, the skin gradually becomes moist, the tongue cleans off, appetite and strength improve, and the patient becomes convalescent.

### GENERAL RULES IN THE TREATMENT OF FEVERS.

Perfect rest of body and mind, freedom from care, annoyance and anxiety, as far as possible.

The room should be well ventilated, aired and lighted, and scrupulously clean.

The bed should be a hair mattress, or a quilt doubled on

a straw or other bed, and the bed linen frequently aired and changed.

Pure cold water should be used as drink, and the face, hands and body should be frequently sponged off with tepid or cool water.

Toast water, gruel, barley or rice water may be used as drink after the fever has a little abated, or drink may be made of any mild, fresh or dried fruits, except when there is diarrhoea, when fruit drinks should be avoided.

Gradually a more substantial diet may be allowed, beginning with baked apples, boiled rice, toast bread, jellies, meat soups, clam soup, fresh fish, and yet more substantial articles of food during convalescence.

VARIETIES OF FEVER are not always sharply defined, and not unfrequently a fever assumes a particular character in its progress, or begins in one form and changes into another.

### ERETHIC OR SIMPLE FEVER.

**SYMPTOM.**—Is usually ushered in by chills or alternate chills and flushes, followed by burning heat and dryness of the skin; full, quickened pulse, dryness of mouth, lips and tongue, the tongue being red, or coated white, thirst, high-colored, scanty urine; and constipation. Sometimes, pains in loins, headache, loss of appetite, hurried breathing, delirium—the symptoms being generally more severe at night. *Profuse perspiration*, bleeding of the nose, diarrhoea, or eruptions on body, are generally signs of the decline of the fever—and the patient is left weak, but otherwise well.

The fever lasts from one to three days, or longer. When its symptoms disappear in 12 or 24 hours, it is called *ephemeral fever*—but it may be the precursor of more serious disorder.

**TREATMENT.** — Give the NUMBER One, twelve

pellets dissolved in six spoonful of water, of which give a spoonful every half-hour during the violence of the chill and fever, and then as the heat and uneasiness abate and perspiration appears, give at intervals of an hour or two hours until entirely cooled off, and convalescence is established. This usually requires but a day or two, when the patient may be dismissed.

### INFLAMMATORY FEVER.

**SYMPTOMS.**—This form of fever commences with a chill of some duration, followed by high fever, strong, quick pulse, burning heat, red face, severe headache, hurried respiration, thirst, tossing and sleeplessness. The symptoms are worse in the evening and are better after midnight and towards morning. It may continue ten or fourteen days, unless cut short by this treatment; and, if mismanaged by active cathartics, may readily run into some grade of slow fever.

It is caused by sudden check of perspiration, exposure to cold damp winds, intense mental emotions, high living, or mismanaged febrile attacks. It generally appears in persons of adult age, full habit and sanguine temperament.

**TREATMENT.**—In this form of fever only the FEVER REMEDY No. **One** is required. Dissolve twelve pellets, in six large spoonful of water in a glass; and of the fluid give a large spoonful every hour, or even every half hour, at first, and so continue giving a spoonful at intervals of an hour during the height of the fever; and at longer intervals as the surface cools off and the surface grows moist, until the full crisis appears and the disease is subdued.

Sponge off the hands and face, and even the surface of the body, frequently during the dry, burning heat, and after sweating; and at first during the chill, or if the feet are in-

clined to be cold, or head very hot, a hot foot-bath will be of advantage. This treatment will generally promptly relieve and gradually arrest its progress. After the fever has subsided, the NUMBER **Ten**, six pellets four times per day, should be given for some days.

### BILIOUS OR GASTRIC FEVER.

These fevers generally originate in some derangement of the stomach or digestive organs. In the origin and progress of the disease the derangement of the biliary or gastric system is prominent. It has less of the violent heat and inflammatory action than the fever so named, and yet not so much of nervous prostration and debility, as in typhoid fevers. The bilious form is more common in warm or hot climates and in the hot season, than in the more temperate regions, while the gastric fever is common in more Northerly regions.

It may be occasioned by great heat and excessive perspiration, which is suddenly checked; or by irritating substances taken into the stomach; or even by violent emotions such as anger, grief or care, or other excitement acting upon an irritable temperament, or in common with other causes.

**SYMPTOMS.**—It has a precursory stage, marked by decided gastric or biliary derangement, headache, coated tongue, bitter or foul taste, deficient appetite and general depression. After this there is a more or less prolonged chill, followed by sharp, pungent heat of the hands, face and surface, violent headache in the forehead, frequently delirium at night, sense of weight and fulness in the region of the stomach, nausea and inclination to vomit, belching up of wind, and vomiting of acid bile or of mucus mixed with bile, tongue thickly coated dirty yellow, bowels are frequently tender and at first constipated, afterwards ten-

dency to diarrhœa. The face is pale and sickly, white of the eyes more or less yellow, pulse quick, tense, sometimes intermitting, and the urine is dark, cloudy, often thick and turbid. The more the liver is implicated, the more yellow the surface, the whites of the eyes, and the darker the urine and more yellow and thick coated the tongue.

The fever is subject to distinct remissions, coming on after a slight perspiration, and after some hours the fever recommences again and there may be a succession of these remissions; the more distinct they are, the more favorable for the patient. This fever is inclined to terminate in the intermittent form, or fever and ague.

TREATMENT.—The No. **One** and the No. **Ten** are the proper remedies in this form of fever. Prepare twelve or fourteen pellets of each number in separate glasses, half full of pure water; and, give for the first twelve hours, and until the force of the fever has somewhat abated, the No. **One**, a spoonful every hour. After that, give the two Nos. **One** and **Ten**, alternately, at intervals of one or two hours, according to the heat and intensity of the fever, and continue these until the violence of the disease is broken; then at longer intervals.

Should a diarrhea come on and threaten to become exhausting, suspend the use of the No. **Ten**, and in place of it give the No. **Four**, until the diarrhea has abated, and then go on again as before.

Should the disease terminate in a regular INTERMITTENT FEVER, give the No. **Sixteen** alternately with the No. **Ten**, every three hours, in solution.

In the invasive stage, before the fever has declared itself, six pellets of No. **Ten**, taken dry on the tongue, three times a day, will correct the action of the stomach and liver, and arrest the entire disease.

## TYPHUS FEVER.

Typhus Fever is defined as an acute specific form of fever highly contagious and infectious, continuing from fourteen to twenty one days, attended with a lethargic and confused condition of mind, an eruption of measles-like appearance, and is of unknown origin, probably a germ disease.

SYMPTOMS.—The precursory stage varies, but is usually short, so that the patient generally gives up and takes to his bed within the first three days, in marked contrast with the protracted invasive stage of *Enteric Fever*. Sensations of uneasiness, soreness or fatigue, loss of appetite, *frontal headache*, and disturbed sleep, are the early symptoms. The patient is often seized with a cold chill or rigor, usually succeeded by dry heat of the skin, thirst, quick pulse, white, dry, often tremulous tongue, scanty and high colored urine, sometimes vomiting, heavy look or stupor, prostration of strength and muscular pains: towards evening there is more irritability and restlessness, and if sleep occurs it is unrefreshing, being disturbed by dreams and sudden starts.

The general appearance of a Typhus fever patient is well marked and affords a ready means of diagnosis. The patient usually lies on his back, with a weary and dull expression of his face, his eyes heavy and with a dusky flush spread uniformly over his cheeks. In the more advanced stage of a severe attack he lies with his eyes shut or half shut, moaning, and too prostrate to answer questions, to put out his tongue or to move himself in bed; or the mouth is clenched, the tongue and hands tremble and the muscles are twitching and half rigid, and the weakness extreme, so that he constantly slips down in the bed. The dryness of the mouth, the sordes on the teeth and lips, the hot dry



skin and the deafness, are symptoms which impress a careful observer at once.\*

During the first week the patient complains of headache and noises in the ears and subsequently deafness; the conjunctiva are injected, pupils of the eyes contracted and painfully sensitive to light, and often in consequence closed,

\* It is well to note some of the characteristic differences between the Typhus, and the Enteric or Typhoid Fever as follows:

#### TYPHUS.

1. Comes on quickly.
2. Occurs at any age.
3. Is rare among the better classes, except from contagion.
4. The eruption is of a mulberry color, comes out the fourth or fifth day, first on the extremities, and lasts through the disease.
5. The brain is chiefly affected; bowels usually natural and the evacuations dark, but never bloody.
6. There is a dusky blush on the face, neck and shoulders; injected eyes, contracted pupils.
7. Runs its course in fourteen to twenty-one days.
8. Relapses are of rare occurrence.
9. Tendency to death is by Coma, (Stupor), or Pulmonary Congestion.
10. Arises from destitution, overcrowding, defective ventilation; and spreads by contagion.

#### ENTERIC.

1. Commences slowly and insidiously.
2. Most common in youth and childhood.
3. Is as common among the rich as the poor.
4. The eruption is in rose colored spots, few in number, generally on the abdomen, and appears in successive crops.
5. The bowels chiefly affected, evacuations dark yellowish, brown and watery; sometimes with hæmorrhage or even ulceration of intestine and the abdomen is tumid.
6. The expression is bright, with a hectic blush, limited to the cheeks; and pupils dilated.
7. Continues from four to six weeks.
8. Relapses are of frequent occurrence.
9. Tendency to death is by Exhaustion, Pneumonia, Hemorrhage, or perforation of the intestine.
10. Arises from bad drainage or poisoned drinking water; decomposed animal matter; often with defective rain fall, or deficient ozone.

He becomes irritable, and his answers are short and fretful. Usually, from the fourth to the eighth day, the mind passes from the state of excitement to one of delirium. This symptom appears earlier and is more severe in persons in the higher walks of life, doubtless in consequence of the greater activity of their brain. This is especially the case with confusion of ideas as to time and place, persons and personal identity, with vague rambling talk, of which occasionally he seems conscious, and from which he can be roused. Later, the delirium may become active and maniacal, or low and muttering. The patient often fancies he is two or three persons, and the subject of a series of miseries and violence; confined in a dungeon, pursued by enemies from whom he vainly flies, or with whom he struggles; and he attempts to spring from the bed, to reach the door or window to escape from his tormentors; sometimes the delirium passes into a heavy sleep, or, with tremulousness of the tongue and hands and twitching of the muscles (*sub-sultus tendinum*); but in favorable cases it subsides in two or three days. Improvement sometimes sets in quite suddenly. Between the thirteenth and seventeenth days the patient may fall into a long, deep and quick sleep, awaking in twelve or more hours quite refreshed. The powers of mind begin again to dawn, the countenance assumes a more tranquil aspect, sleep becomes natural and at length convalescence is fully established. Diarrhoea sometimes occurs and at others the bowels are confined; the evacuations are natural or dark, in contrast with the dark yellow stools of Enteric Fever, or they may be involuntary.

THE PULSE in Typhus is rarely less than 100 and rises from that to 130 per minute. The last, in adults, indicates great danger. As a rule it gradually increases up to the ninth or twelfth day, and then in favorable cases undergoes a somewhat sudden decline. Such cases generally recover. On the other hand departures from the gradual

rise of the pulse indicate complications or dangerous symptoms. In fatal cases the pulse usually grow more and more rapid, weaker and smaller up to the fatal hour. The earliest glimpse of dawning convalescence is shown in the pulse. If the pulse is fairly on the decline and especially if also stronger and fuller, recovery may be confidently predicted. The crisis of Typhus is often only indicated by the fall in temperature, indicated by the thermometer and the decline of the pulse after having reached its maximum. There may be no marked perspiration, no critical diarrhoea, or marked alteration of urine or other noticeable phenomena of any kind beside.

THE ERUPTION appears between the fourth and seventh days, and consists of irregular slightly elevated spots of a mulberry hue, which disappear on pressure, and may be scattered singly and minute, or numerous and large, or running together. They usually first appear on the abdomen and afterwards on the extremities. They at first disappear under pressure of the finger, but afterwards remain permanent, and in fatal cases remain after death.

The ODOR of a TYPHUS patient is characteristic; offensive, pungent, ammoniacal. Nurses are able thus to recognise the disease and grade the degree of danger by the smell.

The nervous symptoms predominate in Typhus, as the poison chiefly acts through the nervous system. Hence, extreme restlessness, ringing in the ears, low delirium or stupor are invariably present. In fatal cases, about the ninth or tenth day, delirium merges into profound coma, or the condition known as "coma vigil" comes on. The patient lies on his back, eyes wide open, awake but insensible or indifferent to every thing around him, his mouth partly open, face expressionless, and incapable of being roused. The stools and urine are passed involuntarily. Finally the breathing becomes nearly insensible, the pulse rapid, feeble, or imperceptible and the transition from life

to death occurs without a gleam of returning consciousness.

UNFAVORABLE INDICATIONS.—Early, furious and persistent delirium, with complete sleeplessness; *coma vigil*; *convulsions*; involuntary twitching of the muscles of the face and arms; abundant, persistent, dark rash; dusky countenance, livid surface; involuntary persistent diarrhoea; suppression of urine; brown hard *tremulous tongue*; temperature up to 105° or higher; sudden and considerable rise of temperature in the third week; a small, weak, or imperceptible pulse, at or above 120°; bed sores, inflammatory or erysipelatous swellings; a strong presentiment of death. The prognosis is more favorable in children from ten to fifteen years of age, and least favorable in adults over fifty.

CAUSES.—*Overcrowding with defective ventilation, destitution and want of cleanliness.*—It is often the scourge of the poor of large towns; too many occupants in rooms, too many houses in circumscribed space, and hence imperfect ventilation of streets and dwellings. *Privation, famine* from failure of crops, commercial distress, strikes, hardships, all undermine the constitution and predispose to Typhus. Dirty dwellings, filthy clothes, personal squalor, are favoring conditions. There is reason to believe that the poison is chiefly transmitted by exhalations from the lungs and skin, which, being inhaled, find ready access to the blood.

TREATMENT.—The No. **One** and No. **Fourteen** are the proper remedies for Typhus or Typhoid Fever. Dissolve twelve or more pellets of No. **One**, in six large spoonfuls of pure water, of which give a spoonful every two hours. Prepare also in a separate glass, with separate spoon, the No. **Fourteen**, in the same manner. Give a spoonful once in two hours, for the first twenty-four hours, and when the heat and fever are high, the NUMBER **One** should only be given. But, after the first two or three days the two Remedies had better be given in alter-

nation, one dose (a large spoonful for adults or a teaspoonful for children) once in two hours, except when the patient is sleeping quietly. The medicine should be prepared fresh every day.\*

AS ACCESSORY MEASURES.—In no other form of fever is it so necessary to have the patient in a large, well ventilated room, with an abundance of fresh pure air. Have frequent changes of the personal and bed linen and of the posture of the patient, to prevent congestion and bed sores. Food and beverages should be given often and in small quantities, at regular intervals, including water, milk and water, toast water, weak tea, broth, and beef tea. The tendency to death is from exhaustion, and hence the patient should have often small quantities of nourishing food; or, if the prostration is great, with irregular circulation or complications, wine or brandy should be given also. Frequently sponge the hands and face, and occasionally the entire body. Keep the patient quiet, and nurse him patiently.

AS PREVENTIVES.—Those in the house, and those especially attending the patient, should take care to avoid the contagion. To this end, fresh air, abundant ventilation and cleanliness are of the first importance. Persons in attendance should avoid the breath, and exhalations from the body on opening the bed-clothes, as far as possible, and the odor of the discharges. These should be *at once* removed and the vessels cleansed with hot water. Nurses should not be overworked, deprived of rest or fresh air; and friends not be worn down by watching, care and anxiety. They should also take as preventives or prophylaxes,

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\* Should a diarrhea set in with frequent loose stools, give the No. **Four**, six pellets every two hours, in alternation with the No. **One**; or should the evacuations be profuse and watery, attended with prostration, the No. **Six** will be better than the No. **Four**, and should be given in its stead *alone* if there is no fever, or in alternation *with* No. **One** if there is *still* considerable fever.

six pellets of No. **One**, four times per day. As additional means, the room should be renovated by whitewashing the walls, washing the woodwork with soap and water, and the bed-clothes and linen should be washed in water to which some chloride of lime has been added.

### ENTERIC, OR TYPHOID FEVER.

This Fever, so called because the chief pathological changes are in the bowels, is a continued and slightly infectious fever, lasting some twenty-eight days and even longer, having a few rose-colored dots on the chest, abdomen or back, and attended with great *feebleness*, abdominal pains or tenderness, and *diarrhœa*, which increases with the disease, the discharges being copious, liquid, of a *light ochre color*, putrid and often containing decomposed blood.

Although the words Typhus and Typhoid are similar, and the two diseases have many symptoms in common, they are essentially different, and some considerations make it desirable that the distinction should be early understood. Thus, the causes are different and suggest different sanitary regulations. Enteric is less contagious than Typhus, and the tendency to a fatal issue varying, the treatment should be regulated accordingly; and if the Enteric Fever be not early recognized, the patient may persist in his usual occupation at a time when rest in bed would save his strength and moderate the force of the disease. For these reasons, it is wise to study the symptoms in the light of the tabulated differential diagnosis given under the section on Typhus Fever, page 177.

Our knowledge of Typhoid Fever, its cause, the means through which persons become infected, and its prevention, has during recent years become greatly extended and rendered more precise.

Typhoid Fever is caused by the introduction of the *Bacillus Typhosus* into the system through the digestive tract and alimentary canal. Primarily the bacilli attack and find lodgment in the glands of the small intestines, giving rise to inflammation and ulceration of these glands, thence



they find their way into the general circulation and may be found in most of the organs of the body. They are in great numbers in the spleen and the gall bladder and duct. In these latter organs they thrive, multiply and persist long after the patient has apparently recovered.

The bacilli are thrown off from the system through the stools or excreta, the urine, the sputa and the perspiration. All these excretions are loaded with the bacilli, and each is a source of danger and should be sterilized and rendered harmless. All soiled linen or that wet by perspiration or the sputa should be at once sterilized by steam or boiling. Nurses handling Typhoid patients should wear rubber gloves. It is only in recent years that the great danger of infection through the sputa and perspiration has been recognized.

There are known cases of "carriers" where the subject is constantly giving off the bacilli and is a source of danger to the community. In these unfortunate cases the bacilli persists in the gall bladder and duct for years, though the subject himself may never have shown symptoms of Typhoid Fever. The bacilli must be introduced through the food we eat, or the water or milk we drink. Food, fingers and flies are the most common [if not the only means of infection—the excretions of patients contaminating the water supply and indirectly the milk—bacilli carried by unclean hands to food. Flies acting as common carriers from excreta to food are most frequent and common means of infection. Particles of dust may also carry the bacilli.

In the Boer war the British lost 8,000 men through Typhoid Fever attributed to typhoid laden dust particles. In the Spanish American war, the U. S. army lost 1,580 men or 142 cases out of every 1,000, in camp, or fifteen deaths in every thousand men. These cases were attributed to flies carrying the bacilli from the latrines or cesspools and depositing them on the food.

Since the Spanish American war Dr. Almoth Wright of England introduced inoculation of dried and prepared bacilli as a means of preventing typhoid. This method of inoculation has been successfully used in the armies and

navies of the world, and is being generally and successfully used wherever large bodies of human beings are congregated as a means of prevention.

By inoculation a mild type of typhoid is created, thus securing immunity to a severer form, a procedure homeopathic in principle, "like cures like".

Inoculation is seldom performed on subjects over 45 years of age, as after that age Typhoid Fever is comparatively rare.

**SYMPTOMS.**—These may be conveniently divided into 1. the period of *accession* and 2. the *three weekly periods*.

Unless the poison is very concentrated there is a period of *incubation*, varying from seven to fourteen days, after which the disease sets in slowly and insidiously. The patient becomes languid and indisposed to exertion; is chilly and unwilling to leave the fire; the back aches and the legs tremble; the appetite fails and there may be even nausea and stomach sickness; the tongue is white, the breath offensive and often the throat is sore; the bowels are generally relaxed; the pulse is quickened and sleep disturbed. These symptoms gradually increasing, the patient will probably have rigors succeeded by increased heat, severe headache and such muscular debility that he takes to his bed. This is the accession. The course of the fever may now be divided into three weekly periods.

**FIRST WEEK.**—The more prominent symptoms are: vascular excitement and nervous oppression, including a bounding pulse, (90 per minute), great heat of skin, thirst and obscured mental faculties; the patient cannot give a coherent account of himself, complains of little except his head, and is usually delirious at night. The abdomen enlarges, drum-like on percussion, and there is tenderness and even pain on firm pressure, especially in the right *iliac fossa*, near the termination of the small intestine, and where also a peculiar *gurgling* sensation is conveyed to the fingers on pressure.

**SECOND WEEK.**—The debility and emaciation become more marked, the muscles as well as the fat wasting; the urine is scanty and heavy, loaded with urea from wasting

of nitrogenous tissues. During the second week there is also frequent *diarrhœa*, which usually increases to five, six, or even more stools, in the twenty four hours. The peculiar character of the evacuations is marked, as follows:—*Fluidity; pale ochre or drab color; sickly, putrid odor; absence of bile; and a flocculent debris*, of disintegrated glands of the ilium. This debris may be discovered by washing the discharges. It is also noticeable that, often before a patient takes his bed or a decided looseness of his bowels sets in, the feces are of a *light ochre color* and furnish the most marked of the early signs of *Enteric fever*.

**THIRD WEEK:**—The debility and emaciation become extreme; the patient lies extended on his back, sinking towards the foot of the bed, without making an effort to change his position. There is a bright or pinkish flush of the cheeks in strong contrast with the surrounding pale skin; *sordes* gather on the mucus membrane of the mouth and lips; the tongue is dry and brown, or red and glazed, and often rough and stiff like old leather; the urine is frequently retained, from inactivity of the bladder; the feces pass without control; the tendons start, from irregular and feeble contraction of the muscles; the patient picks vacantly at the bed clothes, or grasps at hovering black spots which appear to his vision; he becomes deaf, no longer knows his friends; and, on recovery has little or no remembrance of what has at this time occurred, and in most cases the intellectual powers will be impaired for some time after convalescence.

In the majority of fatal cases death occurs about the end of the third week; and it is also noticeable that there appears to be but slight relation between the general symptoms and the ultimate result, rendering the disease one of great uncertainty and perplexity,

**THE ERUPTION.**—From the seventh to the fourteenth day

the characteristic *eruption* usually begins to show itself, mostly on the sternum and epigastrium, in the form of rose colored dots, which are few in number, round, scarcely elevated, and which insensibly fade into the natural hue of the surrounding skin. The quantity of rash bears no proportion to the severity of the disease.

This successive daily eruption, disappearing on pressure, each spot continuing visible for three or four days only, is peculiar to and characteristic of Typhoid fever. The first crop of eruption is rarely decisive; but successive crops, of even not more than two or three spots each, remove all doubt. Sometimes, cases occur in which a single spot has not been detected. Occasionally, also, very minute vesicles appear, looking like drops of sweat, chiefly on the neck, chest and abdomen.

THE TEMPERATURE, as indicated by the thermometer, in this fever, forms a very good indication of the progress of the disease. In the acute specific fevers the elevation of the temperature is *abrupt*, while in this fever it is *gradual*. During the first three or four days almost the only symptom is a *gradual* rise of temperature, and if by the fourth or fifth day the maximum temperature be not 103—5 or 104, the disease is probably not Enteric Fever; and, if on the first or second day it reaches 104, the disease is some other fever, as this point is attained only gradually in Enteric Fever. Temperature is also an important element in the *prognosis*, as we have great variations in this fever, it being low in the morning and reaching its height in the evening. The greater these fluctuations at the end of the second week, the more favorable and shorter the attack. If it falls considerably in the morning although remaining high at night, the prognosis is favorable. But if it remains continuously high at the end of the second week, we may predict a long and severe attack. Probably the first indication of improvement in cases of persistently high tem-

perature will in a decline in the morning temperature. When such a decline occurs, especially if repeated on subsequent days, even though the maximum temperature in the evening remains the same, we may be certain the fever has begun to abate. True, a sudden fall of temperature may result from Diarrhœa or Hemorrhage—probably the latter, when it occurs suddenly; but usually other symptoms would indicate such an occurrence. Unlike Typhus the decline in this disease is usually gradual.

DANGERS:—1. *Hemorrhage*.—This may occur from the ulcerated patches of the *ilum* during the separation of the gland sloughs, and may be either capillary, or from the opening of a large vessel. The discharge of blood may be so great as to be immediately fatal by swooning, or may be remotely so by exhausting the patient, so that he fails to rally from it. Sometimes, without any escape of blood externally, the patient becomes suddenly blanched and dies in a swoon. In such cases a post-mortem examination finds the intestines distended with clotted blood. 2. *Exhaustion*, from *profuse* and *persistent diarrhœa*. 3. *Perforation*.—The ulceration may extend until the coats of the bowel are perforated, causing fatal Peritonitis: this may happen during the second or third week, but more commonly during a prolonged and imperfect convalescence. Symptoms indicating its occurrence, are: a sudden pain and tenderness in the abdomen, with swelling, more or less nausea and vomiting, an altered expression of the features, and death in one or two days. 4. *Congestion*.—The lungs may become congested, giving rise to Bronchitis, Pleurisy with effusion, or Pneumonia; or, latent tubercles may be called into fatal activity: in short, there is a tendency to congestion in the three great visceral cavities, the head, the chest and the abdomen. 5. *Relapse*.—This may occur from inattention to diet, or from too soon abandoning the recumbent posture.



As will be inferred, the disease does not run a uniform course, and cases are recorded where a fatal termination has occurred without the manifestation of any characteristic symptom.

**TREATMENT:**—If at all practicable, the case should be placed in the hands of a competent medical man. Only in his absence should the amateur attempt to treat so serious a disease. But the treatment should in all cases commence with the use of No. **One**, and this should be our main dependance throughout the disease. Dissolve twelve pellets in six spoonfuls of water, large, if for an adult, and small, if for a child, and of this give a spoonful every hour, if the fever is quite high, or every two hours during the usual course of the disease. At night, when the patient sleeps, do not waken him to administer medicine; only, when he wakes, give the medicine that may be due, and let two hours be the usual interval between doses.

After the first three or four days, the disease not having yielded to the use of No. **One**, or only having been moderated by it, and especially with increasing weakness, brown or dryish tongue, some bloating and enderness of the bowels, and loose, brownish stools, prepare No. **Fourteen** in the same manner as the No. **One**, and give these two REMEDIES, in alternation, at intervals of two hours; and so continue, (making fresh medicine every day during the entire course of the disease), except:—should there be excessive or exhausting diarrhea, watery, brownish, frequent stools, substitute No. **Six** for the No. **One**, and so continue until that condition has been removed; and, should symptoms of Bronchial, or Pulmonary Congestion, or Pleurisy, supervene, substitute No. **Seven** for either of the others, and thus give the No. **Seven** and No. **One**, in alternation, every two hours, until the danger has been averted.

Towards the close, the fever having abated, leaving great



weakness of digestion as well as physical and mental debility, the **NUMBER Ten** may be used with excellent advantage, either alone, or in alternation with No. **Fourteen**.

**ACCESSORY MEASURES.**—1. *The Room* should, if possible, be large and well ventilated, allowing the admission of plenty of fresh air, and the escape of tainted air; a hearth fire assists ventilation. Remove all carpets and bed-hangings and unnecessary furniture. A second couch or bed is very convenient, and the bed should be removed from the wall, so that the patient may be readily changed from one bed to the other. Light from the window should be subdued, and all noise and unnecessary talk forbidden.

2. **REST.**—The patient should be but little disturbed and have complete physical and mental rest during the entire course of the disease. Often, unnecessary or prolonged effort results in impeding the cicatrization of ulcers, and in some instances results in their extension and fatal perforation.

3. **CLEANLINESS.**—The body and bed linen, including blankets, should be frequently changed, and all matter discharged from the patient immediately removed. The mouth should be frequently washed with a soft, wet towel, to remove the *sordes*, which gather in all severe forms of fever. The patient's body should be frequently as completely sponged over as possible, with tepid or cold water, as may be most agreeable to the patient, and quickly dried with a soft towel. If necessary, sponging may be done piece-wise to avoid fatigue. It should never be omitted in fevers, is grateful to the patient, soothes away restless feelings, and is indispensable to cleanliness; and the water acts as a tonic to the relaxed capillaries and also tends to prevent bed-sores. If bed-sores have formed, they should be protected with Arnica plaster.

4. **HYDROPATHIC APPLICATIONS.**—A *wet compress*, made by a

folded towel, laid over the bowels, is of utility tending to diminish diarrhoea, check the spread of ulceration, and promote perspiration. If lung complications arise it may be applied to the chest, with benefit.

5. BEVERAGES.—At the commencement of the fever, pure, cold water, toast water, gum water, slightly sweetened, barley water, lemonade, are all that is necessary. Cold water is of supreme importance; it lowers the excessive temperature, sustains the rapid waste and is a valuable adjunct to the treatment.

6. DIET AND STIMULANTS.—In a disease, which lasts three or four weeks, and sometimes five or six, and in which the waste of tissue is great, and when common food cannot be taken, it is a matter of first importance, to supply the patient with appropriate nourishment, lest he may sink before the disease has completed its course. The following points require attention: Patients often are unable to swallow or relish food in consequence of the dry and shrivelled state of the tongue. Thence it is necessary, frequently, to moisten the lining membrane of the mouth, with lemon-juice and water, or other acceptable fluid, and always before food is taken. All the aliment given should combine both food and drink, in *fluid* or semi-fluid form, until recovery has fully set in. The digestive functions being more or less completely suspended, the nourishment given must be that which is most readily assimilated. The following are among the best forms of nutriment:—*Milk*, (a most important article in the treatment of all fever patients); *iced milk*; *thin arrow-root milk*; *wine whey*, (prepared by adding half a pint of good sherry to one pint of boiling milk, and straining after coagulation); *blanc mange* of *isinglass*, or *ground rice* (not gelatine); *yolk of egg*, (beaten up with a little wine, tea, cocoa or milk); *beef-tea*, and *animal broths* (slightly thickened with well cooked old rice, vermicelli isinglass, or a few crumbs of bread); and in some cases

*alcoholic drinks.* Fruits are generally inadmissible. A little good wine, with an equal quantity of water, may be given every hour or two, as the case may require. *Effervescent* wines must be avoided. But the effects of wine or brandy should be *carefully watched by the attendant*, and only given in accord with the demands of the system, the volume and the form of the pulse being the principal guide. Except in small quantities, stimulants are not required by children, or by persons, who can take a sufficient amount of food early in the disease. On the other hand, aged persons, and patients who are greatly prostrated, or with cold extremities, and livid surface, almost invariably require alcoholic stimulants. If stimulants aggravate the symptoms, their employment should be modified or at once discontinued.

Nourishment should also be given with *regularity*; and, in extreme or long continued cases of prostration, as often as every two hours, both day and night.

Fever patients should also be watched day and night. Both their *wants* and their safety demand it. In their delirium they may get out of bed, or even out of the window, and lose their lives from the absence or inattention of the nurse.

MODERATION IN CONVALESCENCE.—Food should only be allowed in great moderation, and never to satiety, until the tongue is clean and moist, and the temperature, pulse, and skin have become natural. Solid food, or too hearty food given too soon, may induce fresh irritation in an imperfectly healed ulcer, inducing fatal hemorrhage or perforation. If stimulants have been given, they should be gradually withdrawn, as the nutritious food is substituted. The craving appetite can only safely be indulged when convalescence is fully established.

Change of air for patients recovering from Enteric Fever cannot be over-estimated. Often the entire system is

changed and youth is renewed. Nothing gives so beneficial a direction to such a change as removal to some suitable climate and locality. *No man can be considered fit for work, for three or four months after an attack of severe Enteric Fever.*

TO PREVENT CONTAGION.—All discharges from fever patients should be removed, on their issue from the body, in vessels, containing a concentrated solution of chloride of zinc. All tainted bed or body linen should, immediately on its removal, be placed in water, strongly impregnated with the same substance. The water-closet should be flooded several times a day with the same substance, and some chloride of lime, also, placed there. While the fever lasts, the water-closets should only be used for the discharges from the sick, and should be disinfected as above.

## YELLOW FEVER.

This very destructive form of fever prevails in hot climates, during the Summer season, in the large cities and towns on the sea coast, or along the large rivers. It is severe or pernicious in proportion to the quantity of undrained land, marshes, and accumulation of putrid filth or refuse matter in its immediate vicinity. The investigations carried out by Dr. Walter Reed, Carroll and Lazear, in Cuba, following the Spanish American war demonstrated beyond question that Yellow Fever was caused by the bite of the infected mosquito *Stegomyia fasciata*, and could not be conveyed from one person to another by personal contact, nor could it be conveyed by any means other than through the infected mosquito.

The attack of Yellow Fever is usually abrupt. In some cases there may be precursors—a slight depression, loss of appetite, languor, pain in the head, and chilly sensations

for a day or two. This is followed by a chill, or rigors, generally moderate, soon followed by intense fever, rapid pulse, high temperature, headache, backache, pain in the limbs, and sometimes vomiting, retention of urine and costiveness are also present. The eyes are *reddened, irritable* and watery. Mind usually clear, but sometimes delirious.

This febrile movement continues from twelve hours to three days, and is followed by a remission of the fever or abatement of all the marked symptoms, and the patient and friends often think the disease is over, but the lull is usually deceptive. There remains a voracious appetite, indigestion, a yellowish tint in the eyes, and mental depression, which are of ominous import. But in mild, well-managed cases, this may be the beginning of convalescence.

In grave cases, however, this lull is deceptive, and, after a period of a few or even twenty-four hours, ushers in the third stage, or that of *collapse*.

The pulse falls to its natural standard, or even down to forty or thirty per minute, and is weak and easily compressed, and the surface is cool. There is increasing yellowness of the skin and whites of the eyes; burning pain in the throat, stomach and bowels; dark colored urine; diarrhoea, restlessness; delirium; hiccough, and the much dreaded *black vomit*, (a fluid resembling coffee grounds, or soot, or snuff suspended in water, and which is really *decomposed blood*), is from time to time thrown up. This matter is sometimes ejected in quantities and with force; at others a mere regurgitation; sometimes acrid, excoriating the mouth and gums. The tongue is frequently reddened, dry and cracked. In advanced stages blood-boils may appear, and hemorrhage from various parts or organs are common. The urine is suppressed or albuminous, and coma and convulsions may occur, and life is terminated by exhaustion or syncope. There are occasionally the so-called *walking cases*, where the patient does not take to the

bed at all, but continues in a half-delirious state about his business, or moving around, until a few hours before death.

TREATMENT.—While the disease is prevailing, take six pellets of No. **One**, morning and afternoon, and six pellets of No. **Ten**, at noon and at bedtime. This should render very light any attack which may occur.

When an attack comes on, the patient should at once retire to his room and dissolve twenty pellets of No. **One** in a glass half full of water, of which a large spoonful should be given every hour. This should be continued without interruption, except the patient sleeps, through the entire first, or stage of fever.

When the remission of fever comes on, making the end of the first, and beginning of the second stage, the No. **Ten** should be dissolved, twenty pellets in half a glass of water, of which a large spoonful should be given EVERY two hours, alternating with No. **One**. This treatment, the alternation of No. **One** and No. **Ten**, at intervals of two hours, should be continued through the entire course of the disease, or until the fever has all disappeared, and there is coldness of the surface, weakness and decided prostration, or *appearance of black vomit*, at which the No. **Six** should be substituted for the No. **One**. The No. **Six**, should be prepared in the same manner as No. **Ten**, twenty pellets in half a glass of water, of which give a large spoonful at intervals of two hours, first a spoonful of No. **Six**, and next time of No. **Ten**, and so on. The only other medicine to be given *for the black vomit*, beside the No. **Six**, is the MARVEL WITCH HAZEL, of which a teaspoonful may be given for this decomposed hemorrhage, with great benefit, at the intermediate hour. Should the urine become suppressed, or very scanty, a dose or two of No. **Thirty**, six pellets in a spoonful of water, will soon relieve. After the vomit has been relieved



and convalescence established, the **NUMBER Ten** may be relied upon, given three or four times per day, for restoration.

**ACCESSORY MEANS.**—The patient must be screened from the mosquito. All persons living in the vicinity should take every precaution against being bitten. Drain swampy land, disinfect cesspools, etc. Destroy the mosquito. During the chill give a hot foot-bath, and, during the heat, frequent spongings of the entire body and limbs with tepid vinegar and water. The diet, during the first stage, should be simply, toast-bread, or crackers soaked in weak black tea. In the second stage, rice, milk, and arrow-root may be added to the diet; and in the third, or stage of prostration, ice-cream, champagne, beef-tea, or wine-whey may be necessary. The patient should remain in bed, comfortably but not oppressively clothed, during the entire course of the disease.

I do not recommend, in general, the treatment of such formidable diseases, as Typhus, Cholera, or Yellow Fever, by unprofessional persons. But there are times and epidemics when competent medical attendance cannot be obtained, and where these simple directions may prove of inestimable value in treating and arresting disease and saving life.

### **MALARIA.—INTERMITTENT FEVER.— FEVER AND AGUE.**

An endemic infectious disease caused by the introduction of a micro-organism into the system from the bite of a mosquito. A disease widely prevalent on the Atlantic coast south of the New England States, throughout the Southern States and in the Mississippi valley. Rarer in other parts of the United States, almost unknown in the northwestern states, the lake regions and the valley of the St. Lawrence.

Malaria is generally classified as of the quotidian, tertian, and quartan types, depending upon the frequency of the paroxysms as they occur daily, every other day or every third day. To this may be added the estivo-autumnal and pernicious malarial this latter form being largely prevalent and confined mostly to the tropical climates of South America and Africa.

The Roman Fever of the Campagna, now almost extinct, through drainage and elimination of the infected mosquito is of this latter type. The predominant and characteristic symptoms of malaria are chill, high fever, followed by copious perspiration, or a hot, cold and sweating stage, followed by a period of great relief or of comparative health during which the patient feels almost well. The three types most common are (1st) the quotidian, in which the paroxysms occur every day—an interval of twenty-four hours of calm or relief, then a recurrence of the paroxysms. (2nd) Tertian, with a paroxysm every other day, an interval of forty-eight hours before recurrence. (3rd) The Quartan, the paroxysm occurring every third day, an interval of seventy-two hours, and again a recurrence. The paroxysms may continue for months before relief is secured. Laveran, a French army surgeon, in 1880 while stationed in Algiers, demonstrated the existence of parasites in the blood of malarial patients. His observations were confirmed by Sternberg of the United States in 1886. King of Washington was one of the first to suggest that the disease was transmitted by the mosquito, but it remained to Manson and Ross of England to demonstrate by practical tests in India and on the Roman Campagna that individuals dwelling in houses effectually screened and otherwise protected from the bites of the mosquito may dwell indefinitely in the most deadly of malarial districts without contracting the disease. This has been most convincingly shown in the good work done by Gorgas on the Isthmus of Panama, where malaria is practically unknown or at least of very rare occurrence.

Havana and other places in Cuba may be taken as a further example. The parasite of malaria is termed plas-

modium, of which there are several well marked varieties which exist in two distinct phases or stages (a) in man, who acts as an intermediate host, and where, during its development in the red corpuscles of the blood, it causes the symptoms of malaria. (b) In the body of the mosquito where it lives and develops.

The three varieties of the parasite plasmodium correspond to the tertian, quartan, and estivo autumnal type of malarial. The remaining or quotidian type, is now known to be a double infection of a group of the tertian parasites causing a daily paroxysm. There may also be a double infection of the tertian and quartan or again of the estivo autumnal causing a continued fever with remissions in which the chill or perspiration may be slight or obscure. Most of our mosquitos are of the genera *Anopheles* and the *Culex*. Our ordinary house mosquitos with the exception of their irritating bite, are harmless and incapable of developing and conveying the malarial parasite. The *Anopheles* alone are responsible for our infliction of malaria. In this case "the female is more deadly than the male". They alone ingest the infected blood. The parasites lodge in the walls of the stomach of the female mosquito; there they live and develop, and entering into the circulatory system find their way into the salivary ducts and glands and are then ready like the virus in the fangs of a rattlesnake to be inoculated into the next helpless victim the mosquito may bite. Introduced into the human system the parasites attack the red corpuscles of the blood, there develop and ultimately destroy the corpuscles and are liberated into the blood again in from 48 to 72 hours, according to the variety of the parasite, whether it be tertian, quartan or estivo autumnal. This bursting and destruction of the red corpuscles or sporulation, as it is termed, corresponds to the chill or cold sweat in the patient. The liberating spores attack other red corpuscles, again multiply and destroy as before, and so on until they lose their virulence or power of doing harm. The *Anopheles* is a country bred mosquito inhabiting low swampy land or stagnant pools. The malarial mosquito is

nocturnal in habit, remains dormant or inactive during the day and is very active and vicious from sunset till sunrise. The belief that haunted the minds of our grandparents in the noxious qualities of the night air and that malaria was caused by miasms and exhalations from the swamps may be relegated to the limbo of forgotten things, along with other old wives tales. The *Anopheles* may be readily distinguished from the *Culex* by its resting position. The body of the *Culex* is almost parallel with the wall or ceiling upon which it is resting. In the *Anopheles* the body is always perpendicular or inclined at an angle of 45 degrees to the wall or ceiling. The wings of the common *Culex* or house mosquito show no markings beyond the vein markings. In the *Anopheles* the wings are marked with zebra like transverse stripes. Wherever there is malaria there you will find *Anopheles* mosquitos, although you may find the *Anopheles* in regions where no malaria exists. This is simply because the *Anopheles* of that particular region have not become infected.

**SYMPTOMS.**—These may set in suddenly, or they may appear gradually, until a regular paroxysm occurs. The *first stage* comes on with a feeling of debility, weariness, chilliness, and rigors; then follow sensations as of cold water trickling down the spine and a shivering of the whole body; the teeth chatter, the nails turn blue, and the whole frame trembles, often with such violence as to shake the patient's bed. The face becomes pale, the features and skin contracted, and the papillæ of the skin are rendered prominent, giving it the appearance described as *goose skin*, such as may at any time be produced by exposure to cold. The countenance acquires an anxious expression, the eyes are dull and sunken, the pulse frequent and small, the breathing hurried and oppressed, the tongue white, and the urine scanty and passed frequently. After a time, varying from half an hour to three or four hours, the *second* or *hot stage* comes on with flushings, until the entire body becomes hot, with extreme thirst, full bounding pulse, throbbing headache, and restlessness, the urine being still

scanty, but high-colored. At length, after two, three, and even six or twelve hours, the *third* or *perspiring stage* succeeds, and the patient feels much relieved. Thirst diminishes, the pulse declines in frequency, and the appetite returns; at the same time there is a red deposit of *urates* in the urine. The perspiration first breaks out on the forehead and chest, and gradually extends over the entire surface; sometimes it is only slight, but at other times it is very copious, saturating the patient's linen and bed-clothes. A paroxysm usually lasts about six hours, allowing two hours for each stage. The period between the paroxysms, is called the *intermission*; but, by an *interval*, is meant the whole period or cycle between the beginning of one paroxysm and the beginning of the next.

EFFECTS.—From the recurrence of internal congestions in each cold stage, the functions of the liver, bowels, and sometimes the kidneys, are disordered; the patient becomes sallow, his limbs waste, the abdomen is distended, and the bowels are constipated. The spleen is especially liable to be enlarged. An enlarged spleen is popularly called *ague-cake*. “The heat-generating power of all victims to malaria is impaired; hence they suffer from atmospheric changes, of which healthy men take no note” (*Maclean*).

### PREVENTIVE.—TREATMENT.

As a preventive: Persons residing in malarial districts, or where fever and ague is prevalent, or those traveling in such regions, along rivers, lowlands, plains or marshes may be protected from this disease by simply taking six pellets of No. **Sixteen**, three times a day. If there are symptoms of its approach, such as depression, headache, bad taste in the mouth, chilliness and pain in the limbs; take six pills four times per day and live for some days on very light, easily digested food, avoiding labor, over-work or fatigue.

It cannot be too strongly expressed that the bite of a mosquito alone conveys the disease. Therefore all pools and stagnant water must be drained as far as possible. A coating of crude oil or petroleum to be applied to all standing water.



All doors and windows of all dwelling houses must be screened, pyrethrum powder or camphor burned in the rooms is effectual in ridding the house of mosquitos. Anointing the hands and face with oil of pennyroyal, camphor water or a weak solution of carbolic acid is a preventive against being bitten. Humphreys' Marvel Witch Hazel should be used to bathe the parts already bitten.

TREATMENT.—For chills which return every day; take, three hours before the chill is to come on and every hour until the chill, six pellets of No. **Sixteen**, permitting them to dissolve in the mouth; then during the chill and heat, take, every fifteen minutes, six pellets of No. **One**, dissolved in a teaspoonful of water. Then, after the chill and heat and sweat have subsided, go on with No. **Sixteen**, of which take six pellets, every hour, until the next chill comes on, and then proceed as before.

For chills which return every other day: take six pellets of No. **Sixteen**, every hour before the paroxysm comes on, also the No. **One** during the chill and heat and sweat, and six more pellets of No. **Sixteen**, after it has passed off. Then during the well day, take three **Tonic Tablets**, every four hours. In all other cases, take six pellets before each meal and at bed time. In cases where the digestion is impaired and liver obstructed, the use of No. **Twenty-four** and No. **Sixteen**, in alternation every two hours, is promptly efficient in arresting the chills and the disease. After the chills have subsided, take three **Tonic Tablets**, four times per day, for four weeks, to prevent a return of the disease, and avoid exposure, heavy, indigestible food, or severe labor. For children give one-half as much medicine as for adults.

### REMITTENT FEVER OR AUTUMNAL MALARIA.

This type of fever usually occurs late in summer or in the autumn. It is caused by the presence in the blood of the estivo-autumnal parasite.

It is possible the different varieties of this malarial parasite may give rise to the difference in form this fever



often assumes. The symptoms are very irregular, and of all the degrees of severity. It may be intermittent, with paroxysms occurring every 24 or 48 hours, ushered in with a decided chill. More often the rise in temperature is more gradual, reaching  $104^{\circ}$  or  $105^{\circ}$ , or continuous, with slight remissions or fall of temperature, for a period of from a week to ten days or longer. There may be slight or no perspiration with a furred tongue and often with delirium and many symptoms simulating typhoid fever. It may be easily and often is mistaken for this latter disease. The bacilli of typhoid at the same time may exist in the body of the patient, giving rise to a true *typho-malarial fever*. Jaundice may be a prominent symptom, forming the so called *bilious remittent*.

TREATMENT.—See pages 199–200.

### PERNICIOUS MALARIAL FEVER.

In tropical countries is apt to begin suddenly with intense cerebral disturbance followed by coma, and too often death. The parasite of malaria may remain in the system for many years with suppressed symptoms of malaria. This condition of malarial cachexia is commonly known as “dumb ague”, presenting the symptoms of ague with impaired digestion, discoloration of the skin and enlarged spleen or “ague cake” which may be readily felt over the left side upon pressure. Enlargement of the liver or kidneys with general debility are commonly found in connection with this condition.

TREATMENT.—See pages 199–200.

### FEVERS OF CHILDREN.

Fevers among children of from one to ten years of age are quite common, and are often brought on by over fatigue; playing in the heat of the sun; exposure in light thin dress, or bare arms or legs, to cold, chilly winds; improper food, sweetmeats; or the irritation of worms, provoked by such food; or the irritation of teething.

Such fevers are manifested by heat of the hands and surface, red face, or one cheek red and the other pale, swelling and throbbing of the veins of the neck, hot head, quick pulse, rapid breathing, fretfulness, and often inclination to sleep.

TREATMENT.—The No. **One** is only required. Dissolve twelve pellets in as many small spoonfuls of water, and of this give every half-hour at first, and then every hour, a spoonful, until the disease is subdued. Should the fever have been occasioned by indigestible substances—raisins, oranges or sweetmeats—and the bowels be constipated, give an injection of tepid water, and repeat it if necessary. And should there be twitchings and startings on going to sleep, thus indicating convulsions, give two pellets of the No. **Thirty-three**, and repeat it again after two or three hours if necessary. Let the patients drink moderately of water, and often sponge off the body with tepid water. Keep them on very low diet, and quiet, until relieved. This is the proper treatment for all forms of fevers, and even inflammation, in children.

### SCARLET FEVER; SCARLATINA.

This is usually considered a very formidable disease, but under the mild and efficient system of Homeopathic treatment, it has lost much of its terror. True, sometimes an epidemic of unusual violence may pass over the country, which carries off quite a proportion of little sufferers, but in general, under Dr. Humphreys' benign system, it passes as a comparatively mild and harmless disease.

There are some three varieties, marking, in fact, degrees in the severity of the disease, and the degree of danger likely to attend it.

In the SIMPLE FORM, it commences with peevishness, chilliness, headache, nausea and vomiting, after which the eruption appears, first at the face and upper extremities and subsequently over the body; either diffused or in patches, assuming a bright scarlet color. The breath is offensive, tongue coated, quick pulse, high fever and soreness of the throat.

The ANGINOSE variety has more violent symptoms; commences with vomiting, which may continue for hours; high fever, quick pulse; eruption somewhat paler and in patches or diffused; the tonsils become inflamed and swelled, and ulcerate; tongue dirty-white or red; great prostration; after some days swelling of the glands of the cheek and beneath the ear; the fever is very high, and surface hot and dry, and often discharge of hot excoriating mucus from the nose.

In the MALIGNANT form, the most violent symptoms are manifested about the head, and it sometimes terminates in fatal congestion to the head before the eruption has fully made its appearance; in milder cases there is constant vomiting, violent pain in the head, stupor with half-closed eyes, pale imperfect eruption in spots, or of brick-dust color; and, after these, excoriating discharge from the nose.

In the milder forms the eruption should begin to grow pale and disappear in three or four days, and the fever and sore throat abate, and the child be well in a week. But the other varieties are uncertain, and may require ten or fourteen days, or even longer.

You may recognize the scarlet fever from other diseases by the vomiting, the sore throat, the high fever, and the subsequent eruption.

TREATMENT.—As a preventive, when scarlet fever prevails in the neighborhood, give the children each morning and night two pellets of No. **One**.

So soon as the vomiting or fever has declared itself, commence with the No. **One**, dissolved in water, twelve pellets in as many teaspoonfuls of water, of which give a spoonful every hour. Continue this from day to day, (preparing new medicine daily), except when the patient is quietly sleeping at the time for giving the medicine, then give it after the patient awakes.

For the vomiting, if severe or frequent, interpose two pellets of No. **Six**, and repeat it two or three times in alternation with No. **One**, until the vomiting is relieved.

After two or three days it will be best to alternate No. **Fourteen**, with No. **One**, prepared in like manner, and

give the two medicines at intervals of two hours, and so continue.

Should there occur swellings under the ear or jaw, if the fever has gone, give the No. **Twenty-three** in alternation with No. **Fourteen**. If discharges from the ear or earache, give No. **Twenty-two** instead. If dropsical swellings, which sometimes occur in consequence of taking cold, No. **Twenty-five**, four pellets, four times per day, will soon relieve.

### MEASLES.

Measles prevail usually towards spring, and is generally a mild, easily-managed disease. It commences with symptoms of bad cold, sneezing, lachrymation, and slight redness of the eyes, and soon a hoarse, *loose* cough, which is characteristic of the disease. The rash appears first on the face in minute pimples in clusters, with a reddish blush, deepening and increasing as it comes out—the first day upon the face and neck, next upon the body, and the third day extending to the lower extremities, by which time it grows fainter upon the face, and disappears in the same manner. There is fever, loose cough, hoarseness, etc.

**TREATMENT.**—Give the No. **One**, twelve pellets in as many spoonfuls of water, of which give a spoonful every two hours, and continue this treatment through the entire course of the disease, unless when sleeping quietly. If the measles do not *come out well*, do not be alarmed about that; keep the patient warm, give some warm tea or nourishing soup, a hot foot-bath, but nothing else; the measles will come out sufficiently. If the cough is troublesome, alternate the No. **Seven** with No. **One**. If very hoarse, give a few doses of the No. **Thirteen**. If the eyes are at all red, inflamed, intolerant of light, No. **Eighteen** will be found to act like a charm, given in alternation with No. **One**, and for any weakness of sight remaining or in consequence of measles, the No. **Eighteen** may be relied upon, giving three pellets four times per day. Care should be taken during the measles, to prevent taking cold, as serious diseases of the lungs may arise as a consequence.

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SMALL-POX; (*Varioloid*).

Small-pox and its modified form, termed varioloid, is a strictly infectious disease, being always communicated by contagion from those who have it. It is important to recognize it at the earliest hour possible, in order to adopt a proper treatment as well as to prevent others from exposure. The following will aid us in establishing the diagnosis:—The disease comes on in from nine to fourteen days after exposure. It begins with chilliness, some fever, a peculiar swimming or dizziness of the head, and headache; the face is flushed, and often bloated; pain in the back, often quite severe and constant; derangement of the stomach, often nausea and vomiting; aching in the bones and soreness of the flesh; and among children and in violent cases, it is ushered in by violent convulsions.

After the symptoms above have continued three days, the ERUPTION begins to come out, showing itself first on the forehead and face in the form of minute red points, which increase in size from day to day, while others make their appearance on the face and by degrees over the hands, arms and other portions of the body, but always more numerous on the forehead and face. If the face is red and swelled, it will be likely to assume the *confluent* form, the pustules all running together and forming a complete crust. But if the face is but little swelled or pale, the pock coming out scattered only here and there, the disease will assume the *discreet* form, with only a few pustules that fill; the fever, vertigo, headache and pains pretty much disappearing as the pock comes out and the disease running a mild course. After four days of development, during which the pustules attain their growth, the *suppurative stage* commences, during which the pock become filled with a yellowish fluid, which gradually changes to a turbid appearance, each pock surrounded by a red circle with a dark indentation at the top. About the tenth or eleventh day from the commencement, and towards the close of this stage, there is for two or three days considerable fever and flow of saliva; after this has passed, the pustules gradually



grow brownish, dry up and fall off, leaving cicatrices or marks of a deep red color, which are quite a period in assuming the natural color of the skin.

**TREATMENT.**—This disease is more loathsome than dangerous; and under Homeopathic treatment, properly treated and understood, generally passes off as a mild, though unpleasant visitation. Two points are of especial consideration, especially during the earlier stages of the disease, namely: To KEEP THE PATIENT COOL, with at all times plenty of fresh air. As soon as the nature of the disease is understood, *keep the room entirely cool, give no warm teas or heating drinks*, and thus prevent the formation of numerous pock, the less of which the better. Children attacked with convulsions should be taken at once into the open air or a room without fire for relief.

All through the disease the greatest possible cleanliness should be observed, with frequent change of linen. When the pustules begin to form, the room should be darkened, which is a partial security against the pitting from the disease. Give only cold water, cold toast-water or cold black tea for drink. Gruel of meal, oat-meal, barley, rice or farina, all taken cold, is the best nourishment. After the disease has spent its force, baked apples, boiled rice, custard, toast, etc., may be allowed.

As medicines, from the first symptoms, give the No. **One**, twelve pellets in six spoonfuls of water, of which give a spoonful every hour during the entire presence of fever. After the fever has measurably abated, prepare the No. **Fourteen** in like manner with No. **One**, and give the two alternately at two hours intervals, until the drying off of the crusts.

**P. S.**—If the *SARRACENIA PURPUREA* (popularly known by the names of *Indian Cap*, *Pitcher-Plant*, *Side-Saddle Flower*) can be procured, give it from the first and all through the disease; ten drops of the tincture in a glass half-full of water, which give in spoonful doses alternately with the No. **One**. I have known it to arrest the disease when given early, and to materially shorten its course and prevent the pitting.

*The Prevention of Small-Pox, by Vaccination.*—There is unquestionably some risk in vaccination, as formerly prac-



ticed, with lymph taken from the human subject. Unhealthy matter may thus be introduced, carrying disease with it, and thus life-long evils be inflicted. But these results, on the whole, have not been common; and have generally proven to be the careless abuse of a system, rather than its legitimate use. Undoubtedly, all the danger to be apprehended from the use of ordinary humanized lymph, as formerly practiced, is entirely obviated by the modern use of *bovine* lymph,—i. e., the vaccine-matter taken directly from the calf. Its use is so greatly extending among the profession within a few years past, and it is so easily procurable, that it may be considered as in every way preferable to lymph taken from the human system. Matter if taken from the human subject should be selected with care, from an unmistakably healthy child, one who has no scrofulous or syphilitic taint in its system, and has no eruption of any kind upon the skin or scalp. The matter taken should be introduced just beneath the skin of the outside of the upper third of the left arm, inserted not so deep as to make it bleed, and yet deep enough to show a slight discoloration. It will run a mild course, and produce a pustule in ten or fourteen days, that in drying, will give a tamarind-stone-like crust, and leave a deep and peculiar cicatrix which will show during a life time. If, during the course of the vaccination, any fever should manifest itself, give the **NUMBER One**, and if any eruption of the surface, give **NUMBER Fourteen**, night and morning, until it disappears.

After many years of observation, and balancing all the dangers and inconveniences of vaccination and non-vaccination, my conclusion is, that every child should be vaccinated; and adults may be properly re-vaccinated when in danger of exposure to immediate contagion. This is the shortest, safest and best method.

**CHICKEN-POX.**—(*Varicella*).

This disease has sometimes been confounded with small-pox or varioloid. But it may be known by the vesicles appearing mostly on the covered parts of the body or scalp, while in small-pox, they are mostly in the face; by the vesicles being smooth and transparent, filled with water and growing rapidly, attaining the size of a pea in a day; while in small-pox they are pustules, firm and hard, and begin to fill only after three or four days of growth. With chicken-pox there is some fever; the thin watery vesicles come out often in clusters, commencing with a thin pellicle which bursts or dries up, forming a small puckered scab and rarely leaving a pit or depression.

The whole disease is mild, and usually runs its course in four or five days, unattended with danger.

**TREATMENT.**—Give the No. **One**, ten pellets dissolved in as many spoonfuls of water, of which give a spoonful every one or two hours during the course of the disease. If a new crop of vesicles comes out afterwards, give six pellets of the No. **Fourteen**, morning and night.

**MUMPS.**—(*Parotides*).

This disease consists of a swelling of the salivary glands, and is usually not dangerous unless the patient is exposed to cold during the progress of the disease, when it is liable to make a transition (metastasis) to some other organ. It is first noticed as a swelling of the parotid gland in front of, and beneath the ear, first commencing on one side and then extending to the other, rarely both at once; sometimes the whole neck is involved and the swelling extends beneath the jaw. It is attended with fever, and *pain when chewing*, especially firm or hard food, and at times pain in swallowing. Sometimes (on the fifth or seventh day), the swelling

leaves the neck and attacks the breasts or testicles, which become red, swollen and painful. At times, in sensitive children with prominent heads, it has been known to fall upon the brain, producing delirium or other dangerous symptoms.

TREATMENT.—Keep the child in a comfortable warm room, prevent exposure, make no applications except a light cloth around the neck and give no stimulants. Give the No. **One**, ten pellets dissolved in as many spoonfuls of water, of which give one every hour. After the fever has abated, prepare the No. **Twenty-two** in like manner, and give alternately with the No. **One**, at intervals of two hours, until the disease has disappeared. Should the disease fall upon the testicle, the No. **Thirty** will soon relieve, given every two or three hours. For fever, delirium or congestion to the head, the No. **One** is perfectly appropriate, and will soon relieve.

#### CEREBRO-SPINAL MENINGITIS.—(*Spotted Fever*).

This is an epidemic and infectious disease, occurring generally in winter and spring, especially where there is much moisture and great variations of temperature. Its disease-germ thrives best in circumstances of insufficient nourishment, damp, overcrowded, badly drained and ventilated houses with unclean ground floors; though it is by no means uncommon among the better classes of community. No age is exempt from it, but childhood is oftenest and most severely attacked. It begins suddenly with shivering, followed by fever; sickness, and vomiting; intense headache, pains in neck, trunk and limbs, and great prostration and restlessness. The fever increases, and is irregular, varying from 100.4° to 104° F.; breathing more rapid; pulse also irregular

and not corresponding with height of the temperature, and varying 30 or 40 beats within a few hours; the patient has a look of great distress; the tongue is dry and cracked, or else moist and heavily coated; when there is an eruption it is lighter in color, comes on sooner and fades sooner than that of typhus, and is succeeded by peeling of the skin. These spots are of varied size, of a purplish, or "black and blue" color, which do not fade under pressure; and usually commence upon the upper eyelids, extending gradually to other parts of the body. *The sensibility of the body is intense, every touch causing agony.* The symptoms increase in violence up to the third day, when the swallowing and breathing become affected; *the head is dragged back upon the neck;* delirium, stupor, and death occurring from the fifth to the eighth day; some cases even, becoming fatal in from 12 to 30 hours.

Its diagnosis is difficult in isolated cases, or when occurring in connection with some other disease, but the *suddenness of attack*; the extreme *irregularity of pulse and temperature*; its *peculiar eruption*; the pain in the front and back of head, the *stiffness of neck*, and extreme *tenderness of spine*, and to touch generally, should lead to a suspicion of its nature. Its *dangerous* symptoms are a quick, feeble, or very slow pulse; difficult breathing; delirium; persistent vomiting; convulsions. Convalescence must be closely watched, for among its *after-effects*, are (within two to four weeks) paralysis, most often of the palate, causing nasal voice, and fluids enter the nose at the back of the throat, causing difficult swallowing; and paralysis of the eye, causing squinting; or of the heart, causing death by fainting.

**TREATMENT.**—From the first, the **NUMBER One**, twelve pellets in six teaspoonsful of water, a teaspoonful at a dose every hour. Sponging with warm water; nourishing diet, small quantities at a time; great quiet, a darkened room, etc. Consult a good homeopathic physician promptly.

## DISEASES OF THE SKIN.

The larger proportion of skin diseases are of parasitic or microbic origin. The commoner forms of eruptions on the skin arise from indigestion or some other constitutional disturbance and are as a rule of minor importance except as to appearance and annoyance to the patient. There are various forms of rash or eruptions characterizing measles, scarlet fever, chicken pox, small pox, syphilis and other grave morbid conditions. These latter do not properly come under the head of skin diseases any more than do boils and carbuncles.

All cases of skin diseases call for the utmost cleanliness, both external and internal, the proper local applications, and the appropriate internal remedy, together with care against spreading the contagion or infection to others when it is capable of transmission.

### ERYSIPELAS.—(*Rose*).

An infectious disease caused by the micro-organism "*Streptococcus Erysipellatus*" occurring often as endemic or epidemic, usually prevalent in the spring of the year or damp weather but confined to no time of the year. *It*

more frequently follows wounds, injuries or surgical operations. Women during confinement and childbirth are especially liable. Squalor, unsanitary conditions and surroundings, general lack of cleanliness, favor its development.

Though sometimes trivial, is oftentimes a very serious disease. It is known by a spreading inflammatory redness of the skin, with considerable puffy swelling, tenderness, burning, painful tingling, and tension. The color varies from a faint-red to a dark-red or purplish color, becoming white under pressure, but resuming its former color on the removal of the pressure. An attack is usually ushered in with shivering, languor, headache, nausea, bilious vomiting, and the ordinary symptoms of Inflammatory fever, accompanied or followed by inflammation of the part affected. When Erysipelas attacks the face, it nearly always commences at the side of the nose near the angle of the eye.

Erysipelas may prove fatal by *exhaustion*; by *obstruction to the air-passages* (when the inflammation extends to the tissues of the wind-pipe); and by *coma* (morbid drowsiness), from effusion of fluid within the cranium, arising from extension of inflammation to the membranes of the brain.

*Phlegmonous Erysipelas* is marked by a deeper redness, or it may be redness of a dusky or purple hue, which is scarcely, if at all, removed by pressure; the pain is burning and throbbing; the swelling is greater, and the surface irregular; and there is often deep-pitting upon pressure. Sometimes the swelling and disfigurement are so great that the features are quite obliterated, and the parts lose all resemblance to anything human. Delirium often occurs irrespective of an involvement of the membranes of the brain.



The simple or cutaneous variety is attended with much less danger than the phlegmonous: or than that caused by a wound. It is also more serious when it occurs in an epidemic or endemic form. Mere extent of inflammation is not of so much importance as a high degree of blood-poisoning, combined with a rapid, weak pulse, a dry, brown tongue, low muttering Delirium, and great prostration. When the disease attacks the head, unless it is controlled by skilful treatment, the membranes of the brain are in danger of being implicated. The disease in any of its forms is most serious at either of the extremes of life. Lastly, the habits and health of the patient, prior to the attack, greatly influence the result. It is especially fatal to drunkards and in broken-down constitutions.

DIET.—Pure water, gum-water, or barley-water, with lemon-juice, to allay the thirst. Severe and tedious cases require essence of beef, or *Extract of Meat*, and even wine or brandy. Subsequently, a change of air, regular habits, and nourishing diet, essential in the after-treatment of all acute diseases, are necessary after severe Erysipelas.

TREATMENT.—From the first, the No. **Fourteen** is the proper remedy, not only for light and trivial cases, but for those of the gravest character. Dissolve twelve pellets in six large spoonfuls of water, of which give to children a small, and to adults a large spoonful, every two hours, and continue this treatment without interruption during the waking hours. In acute erysipelas, or when there is fever, or in erysipelas of the face, or when there is tendency to assume a severe or phlegmonous form, prepare also the No. **One**, in the same manner as No. **Fourteen**, and give the two in alternation, at intervals of one hour, and so continue the use of No. **One** until the fever, heat, and swelling is allayed, then give No. **Fourteen**, a dose once in two or three hours.

**LOCAL MEASURES.**—In mild forms of the disease, cold compresses of HUMPHREYS' WITCH HAZEL should be applied. In severe cases apply collodion or ichthyol. Scorched flour sometimes allays the itching, and absorbs any fluids that may exude from the affected part. If there is much cedema, (dropsical swelling) of a limb, moderate pressure should be maintained by the application of well-adjusted bandages. If matter forms, incisions are generally necessary to afford openings for its discharge; poultices are then to be applied, and afterwards bandages, to prevent the lodgment of matter. The patient should live on very light vegetable or farinaceous diet; no meat or meat soups until full convalescence.

**ERYSIPELAS OF THE LEGS** often appears in a very torpid form, as a *darkish red or motiled patch* on the leg, without fever or much heat or irritation of the part, and aside from the discoloration, the patient would scarcely know of its existence. In these cases, give the **NUMBER Fourteen**, six pellets four times per day, dry or dissolved in water, living on very light, easily digested food; and rest the limb as much as possible, and the disease will disappear.

#### **HERPES.**—(*Shingles—Tetter*).

Herpes consists of clusters of vesicles or minute blisters upon inflamed patches of variable size. The eruption runs a definite course, rarely lasts more than three or four days, (except in the form known as "Shingles") is not severe, and leaves no scar; it is frequently seen upon the lip as a "cold sore."

"SHINGLES," (*Herpes Zoster* or *Zona*) is an acute form of Herpes, lasting from fourteen to twenty days; and generally affects the trunk, chiefly on the right side; but occasionally the face, shoulder, abdomen, or upper part of the thigh.

It follows the course of one or more of the cutaneous nerves, generally stopping short in the middle, though it may extend across to the other side, and has the appearance of a line of patches, like a belt, half round the body. It is most common in the young, particularly during change of weather, and is often preceded by neuralgic pains, the eruption following in the same locality. In some rare cases, ulceration may supervene; there may be much pain, smarting, or burning; and the scars may remain for some time. It is now well established that it depends upon disease of the trophical fibres of the motory and sensory nerves supplying the part. Zona is much dreaded, and uninstructed nurses foolishly state that if the patches extend round the body, death is certain to result. There is, however, no danger, unless the patient is very old and feeble.

GENERAL SYMPTOMS.—In addition to what is stated above, there is often feverishness, headache, shivering—and, perhaps, neuralgic pain in the side, which may be very acute. The disease is mostly accompanied by sensations of heat, tension, and burning, felt even before the appearance of the eruption, and is followed by weakness and depression. When the disease occurs in the aged, or in persons of feeble constitution, there is much debility, and ulceration may arise, further debiliating the patient.

CAUSE.—*Irritation of the nerves*—as when Catarrh affects the nose or lips.

TREATMENT.—Give the No. **Fourteen**, six pellets every three hours, and if there is fever, alternate the No. **One** with it, as an intermediate remedy, with light vegetable or farinaceous diet, rest, and avoid heat and exposure. Apply collodion or ichthyol (10%) to the rash.

#### URTICARIA.—(*Hives*—*Nettle-rash*).

This affection mostly attacks children, though some adults have it in a diffused form with much severity.

It generally appears as a feverless eruption, coming out in spots much like the sting of a bee or mosquito, or the sting of nettles, a pale, or red, or whitish eminence, somewhat hard, from half an inch to an inch in diameter, often clustered together; these spots are attended with heat, itching and burning, causing great annoyance. They disappear after some hours, and reappear again in other locations, being more likely to appear in cool, than in warm temperature. In adults, it sometimes appears as a deep scarlet rash, attended with heat, itching and swelling, and covering the entire person. It is most common in spring and early summer; is usually developed by changes of temperature; over-eating; certain kinds of food, such as bitter almonds, cucumbers, mushrooms, oatmeal, fish or shell fish; and in children is almost always connected with some derangement of the digestion; also mental depression, anxiety, the wearing of flannel and anything that irritates the skin. It is apt to reappear from time to time.

TREATMENT.—Give the No. **Fourteen**, six pellets morning, noon and night. This will be sufficient in ordinary cases. But if there is considerable of it on the person, arms or limbs, or fever, and the itching is annoying, dissolve twelve pellets of No. **One**, in six spoonfuls of water, of which give one spoonful every hour until relieved. Then give No. **Fourteen**, four times per day.

In chronic cases and to eradicate the disease from the system, and when the digestion is at fault, give six pellets of No. **Fourteen**, morning and noon, and six pellets of No. **Ten**, at night.

#### TINEA.—(*Ring-worm*).

This is an affection of the hairs, of the skin, scalp, chin, or other parts of the body, due to the growth of a fine white

powdery fungus which grows in the interior of the hair-roots. The hairs swell, become paler and brittle, and tend to crack across, or break off close to the head; and the resulting inflammation of the hair bulbs, while killing the fungus, also leaves permanent baldness.

This disease usually commences in a limited spot and thence spreads out in a circular form; and, as the centre regains its natural appearance, and the borders extend, it forms a ring—hence the name. At times rings form within each other, in broken or imperfect forms, and extend in various directions. The ring is occupied by small vesicles, which after some days break and leave a rough, reddish surface, with a rose-colored base. The duration of the disease is uncertain.

This disease appears in different forms, is generally of a vegetable parasitic origin, and is always contagious, being readily communicated from one child to another, by means of the comb, brush, towel or even by contact of the diseased part. There are several forms, the principal of which are:

**TINEA TONSURANS** (*Tinea capitis*), the common scurfy Ring-worm of the scalp, is generally seen only in children, is contagious, but not necessarily associated with impaired health, and most common in lymphatic persons. It consists of circular patches varying from half an inch to several inches in diameter, the hairs of which look dry, withered, and as if nibbled off at a short distance from the scalp. The parasite is visible in a good light, appearing like powdered sulphur when Chloroform has been applied.

**TINEA DECALVANS** (*Porrigo decalvans*) consists of smooth, circular patches of perfect baldness, quite pale, of variable size—half an inch to two inches or more in diameter, and of which there may be several: the disease is sometimes seen in young persons, chiefly in girls, but is most common in adults.

**TINEA SYCOSIS** (*Barber's Itch*), is transmissible by contagion.

from the use of a razor previously employed in shaving an affected person. This method of transmission has been often noticed, and we call attention to it to suggest the preventive means—viz., the immersion of the razor in hot water, and wiping it before use.

**SYMPTOMS.**—It is a disease of adult life, and commences insidiously, a red itchy patch being first noticed, which, after rubbing or scratching, and the lapse of a little time, becomes much more troublesome, as the follicles enlarge and pustulate; there is considerable sensation of burning, and shaving is very painful. Successive crops of pustules appear, often grouped together, the fluid exuded becoming dry, and forming into crusts. The hairs become dull, brittle, and easily removed; and much discomfort, and sometimes disfigurement, is the result. The disease is very apt to become chronic, recurring at certain seasons; and is often very obstinate.

**TINEA CIRCINNATA**, is the form which attacks the body.

**TINEA VERSICOLOR** commences as small reddened points, with itching, which is increased by warmth: slightly elevated, dry, rough patches of a fawn-color arise, somewhat scaly at the edge, and from which branny scales can be rubbed off; they occur on the chest, abdomen, and arms; vary in size from that of a three-penny-piece to that of the palm of the hand, and are much irritated by flannel. It is sometimes called *variegated Dandriff*, or *Liver-spots*.

**TREATMENT.**—The NUMBER **Fourteen** is the appropriate remedy. Give six pellets three or four times per day, either dry or in water, and paint with iodine or ichthyol (10%).

**TINEA FAVOSA.**—(*Porriago favosa*).

This is the *crusted* or *honey-comb Ringworm*. It commences when the patient is about seven years of age, and is characterised by the presence of small straw- or sulphur-



colored cupped crusts, which coalesce and give rise to a honey-comb appearance, or remain separate. It is contagious.

It is one of the most obstinate of eruptions, and very serious consequences inevitably result from repelling it from the surface, by means of ointments, or other external applications. It usually commences as a cluster of minute vesicles or pimples, in colored, irregular, circular patches, on which appear yellow points or patches, which contain a yellowish-white, thick, viscid fluid, of an offensive odor. This discharge is corrosive and irritates the surface, causing the eruption to extend. The hair becomes glued up and matted, and thick hard elevated crusts are formed of varied shape and appearance. This form of tenia is most liable to commence at the back of the head, towards the nape of the neck, and swelling and enlargement of the glands of the neck are not unusual.

TREATMENT.—The less moisture, water, soap-suds, etc., is applied to the scalp the better. Water and soap, while they soften and cleanse the part, seem to convey the infection to the healthy portion of the scalp, while the effect upon the diseased point is not very beneficial. Hence, keep the head as clean as possible, and use as little water or soap as possible, shingle off the hair over the diseased part, or the entire head at once, the sooner the better.

Give the No. **Fourteen**, six pellets for an adult or three for children, dissolved in a spoonful of water, four times per day, and apply to the affected part every second day a portion of the WITCH HAZEL OIL (COMP.) with the end of the finger, or with a fine, soft sponge. The diet should be mild and not exciting. Should there be heat and irritation of the scalp, an occasional portion of six pellets of No. **One** may be given with advantage to relieve the irritation.

ECZEMA.—(*Catarrhal Inflammation of the Skin—Scalled Head—Milk-Crust*).

DEFINITION.—Eczema is essentially a catarrhal inflammation of the skin characterized by more or less superficial redness, of small *closely-packed vesicles*, usually not larger than a pin's head, which run together, burst, and pour out a *serous fluid*, that dries into thin yellow *crusts*. The exuded fluid has the property, when dried, of stiffening linen, which distinguishes this from other skin diseases. Pain, smarting or itching, are also present. It is one of the most common eruptions, constituting one-third or more of all skin affections; and lasts a varying time, in consequence of successive local developments, and its tendency to spread. After its disappearance no traces are left of the disease.

SYMPTOMS.—The most usual is a red surface with vesicles or fissures from which the serous fluid exudes. The vesicles *appear in successive crops*, may prolong the disease for an indefinite time, and are attended with *itching* and local *heat*. The skin is irritable; occasionally excoriations or crackings of the part occur, and sometimes the parts around the patch inflame, probably from the irritating nature of the discharge. If no vesicles be apparent, the disease may be recognized by the skin feeling thick when raised by the finger and thumb, by the starchy nature of the discharge, the formation of thin yellow crusts, and the irritation. The most common seats of the patches are the scalp, behind the ears, the face, the forearms, and the legs, and its appearance differs greatly in each of these locations. If the disease be extensive, there may be considerable fever, a pallid appearance, headache, loss of appetite, etc. The mucous surfaces may become the seat of inflammation, either by the spread of the disease from the skin or as a consequence of the general condition. The retrocession of Eczema may be followed by other diseases—Diarrhœa, Bronchitis, or Leucorrhœa in the female.

VARIETIES.—*E. simplex*, in which the inflammation is moderate, and often results from exposure to the sun's rays; or from irritants—heat, cold, bad soap, etc. If it occur in hot weather, the patient complains of fever, a "heated state of the blood," etc., and the eruption follows, appearing on the exposed parts of the body—the face, neck, arms, back of the hands, etc.: this condition is commonly called "*heat-spots*." *E. rubrum* is a more highly inflammatory variety, the eruption being *very red* and shining, and there is much general disturbance; the *burning* is severe; brownish scabs are formed; and the parts usually affected are the inner side of the thigh, groin, elbow, wrist, etc.: it is apt to become chronic in old persons, and when it occurs about the legs, is called "the weeping leg," and often leads to Ulcers. It often occurs on legs affected with varicose veins. *E. impetiginodes* is the variety which occurs in lymphatic and debilitated children, especially those who have a tendency to the formation of *pus*; the discharge is soon mixed with pus, which forms greenish-yellow thick scabs: it is commonly seen on the heads of infants (*Porrigo, Capitis, Scalled-head*), and is a combination of Eczema and Impetigo. *E. chronicum* is the chronic form of any of the foregoing kinds of the disease; it often oscillates between cure and recurrence; and the skin becomes harsh, dry, red, and thickened. Syphilitic or scrofulous complications render the disease very intractable.

CAUSES.—Eczema probably depends upon constitutional irritability, and is sometimes hereditary; hence trivial exciting causes are sufficient to develop the disease—the action of the sun's rays, heat, cold, the use of cosmetics, paints and washes, and stockings dyed with aniline, etc. In adults, it is a common sequel to overwork, anxiety, irregular habits, etc. The rash developed by sulphur-baths, the rubbing in of Croton oil, and also that following hydropathic treatment, is eczematous. Shoemakers, who

sit long with their thighs together; grocers and cooks, from handling sugar, etc.; washerwoman, from the frequent use of soda and soap; bricklayers and builders, from the contact of lime, and others, from similar causes, are liable to Eczema. In infants it is often due to friction and irritation of clothes wet with urine; improper food; impoverishment of the mother's milk; or being too warmly covered; or want of attention to the general health. It is impossible to over-estimate the influence of improper diet and regimen in the production of Eczema.

**TREATMENT.**—The NUMBER **Fourteen** is the proper remedy and should be given six pellets four times per day, for adults, two or four pellets for children, dissolving each portion in a teaspoonful of water, or they may be given dry if the disease is only slight. After NUMBER **Fourteen** has thus been taken a week, the doses may be reduced to one at noon, and one at night, and six pellets of NUMBER **Twenty-Two** should be given each morning in water. If there is violent itching, redness, and burning, and intolerable restlessness in case of children, dissolve six pellets of NUMBER **One**, in six spoonfuls of water, and give a spoonful every hour, until the itching abates, and rest is procured. This is the proper treatment, and should be persevered in.

**ACCESSORY MEASURES.**—The parts should be kept clean by frequent gentle washing with cold or tepid *soft water*. *General Baths* are of the greatest utility in Eczema, as in all other chronic skin disorders, for they stimulate the healthy surfaces to increased activity, and so compensate for the imperfect action of the diseased portions. The great vascularity of the skin, its large daily secretions, and its breathing power in aid of the lungs, prove how corrective the healthy play of its functions must be in cases of threatened mischief to the internal organs.

Anoint the skin with olive oil after bathing. *Hard water* is irritating; and when rain water cannot be obtained it may be softened by boiling, and the addition of bran, flour, or other mucilaginous matters, which further abstract the lime salts. The washing should be done so as not to spread the irritating discharge over unaffected surfaces, and afterwards well dried by pressure with a soft cloth, not by rubbing. In Eczema, as well as other eruptions on the legs, we may suggest the value of *elevation* as an element of treatment. The clothes should not be allowed to produce friction on the parts. Vegetable food, especially such as is eaten uncooked—lettuces, celery, watercresses, etc.—may be taken, for vegetables contain potash salts, which are abstracted in the process of boiling. The general health must also be regulated. *Cod-liver-oil* is especially recommended.

#### ACNE.—(*Pimples*).

DEFINITIONS.—“A chronic Inflammation of the sebaceous glands and hair-follicles, characterised by an eruption of hard, conical, and isolated elevations of moderate size, and various degrees of redness.”

NAMES AND VARIETIES.—The word “acne” (which in all probability was given in error for *acme*), was intended to signify the occurrence of the disease at the *acme* of man’s development—puberty, when, indeed, the simple form is most common. In *A. punctata* there is simply a collection of sebaceous or suety matter, in the form of a pointed eruption: this collection, when squeezed out of the skin, comes out in a cylindrical form, having the appearance of a small grub or maggot (*comedones*); hence it is sometimes called “maggot-pimple,” and is most frequent in young females. *A. indurata*—sometimes called “stone-pock”—describes the disease when it is chronic and indolent, and when the pimples are become *hard*, with a dusky-red base;



they are often painful, and produce a sensation of tightness about the face, the skin being congested and thickened. *A. rosacea* is seldom seen in young persons, but sometimes occurs in women in whom the catamenial function is imperfect; the redness is bright, there being much congestion; the veins are varicose, the face is much disfigured, the surface is red and dotted over with pustules, the skin is thickened, and food and stimulants produce great burning and flushing of the face. Alcohol, by flushing the face, causes what are termed "grog-blossoms," which are spots of Acne; but the disease is not necessarily connected with frequent alcoholic stimulation, since it sometimes occurs in the abstemious. *A. strophulosa*—"white Gum-rash"—consists of small white pimples, chiefly about the face and neck.

CAUSES.—Congestion of the sebaceous or fatty follicles. This condition may be induced by various internal and external agencies; by the stomach, which has a great reflex action on the face, as seen in flushings after food, etc.; by enervation, intemperance, constipation; physiological changes (as puberty); menstrual irregularities, and sexual abuse by young men; cold; the use of cosmetics; the effects of some medicine, as *Iodine*; neglect of cleanliness, etc. It is of most frequent occurrence in the spring season, and then often returns for several successive years.

TREATMENT.—Take six pellets of **NUMBER Fourteen**, night and morning, or, if the face or pimples are red, take **NUMBER Thirty-Five**, morning, and **NUMBER Fourteen** at night. If the eruption is driven from the face by applications, it is liable to be followed by disease. Such applications are, moreover, unnecessary, as the eruption will disappear if **NUMBER Fourteen** and **Thirty-Five**, is perseveringly used.

ACCESSORY MEANS.—Simple diet, exercise, bathing, and the correction of indigestion, menstrual derangement, debility and any obvious constitutional or local causes.



ITCH.—(*Scabies*).

This well known disease consists of a peculiar eruption of the skin, characterized by pointed vesicles, usually small, transparent at the top, and filled with thin matter, and sometimes these pimples become enlarged to pea size, like pustules or blisters. The pimples on being scratched, often bleed, or the tops become filled with dark blood. The eruptions appear on every part of the body, except the face, generally most abundant on the wrists, and between the fingers, less so on the arms, and legs, and body. It is attended with violent itching, worse at night and when undressing, and is more common and more likely to appear on children than adults. It is caused by the burrowing in the skin of a minute insect, called the *Acaris-scabei*, and the violence of the symptoms depends upon the number of these insects present, the length of time they have been present, and the degree of sensibility of the patient's skin. It is strictly infectious and readily communicated by contact, clothing, or sleeping in the same bed.

TREATMENT.—This is not a disease to be cured in a day. It will at best require some weeks, if fully developed, oftentimes longer. The patient should have plain, but good, wholesome food, free from condiments or stimulants as possible, and the greatest care should be observed by frequent bathing, and change of linen, to keep the skin as pure and free from infectious matter as possible. Dissolve daily twelve pellets of **NUMBER Fourteen** in four spoonfuls of water, of which give a spoonful four times per day. Prepare likewise a lotion, by putting one ounce flour of sulphur to eight ounces of alcohol, and after shaking well, put a table-spoonful of this tincture to a coffee cup of water, and after bathing every night, apply this to the surface.

In general practice, the free application of *Sulphur*-

*ointment* is rapidly effective in destroying the insect and its ova. After thoroughly rubbing the whole body with soft-soap and warm water, then washing in a hot-bath, or with hot water, and wiping thoroughly dry, the superficial and effete cuticle is removed, and the burrows and parasites freely exposed; the ointment should then be well rubbed in and allowed to remain on the body all night. On the following morning a tepid bath, using yellow soap to wash off the ointment left on overnight.

If the application of the ointment and the ablutions be not thorough, the process should be repeated once or twice. *Sulphur-ointment* must not be continued too long, or it will produce an irritable state of the skin, which may be mistaken for a persistence of the disease. The administration of *Sulphur*, during the use of the ointment, and for two or three days subsequently, is recommended. Greasy substances alone are natural cures of Itch. *Glenn's Sulphur Soap*, which may be procured at any druggist's, is also very effective. This may be applied at night after bathing, forming a lather upon the surface which may be sponged off the next morning. All contaminated linen should be put into boiling water; other garments should be well ironed with a hot iron, or exposed to hot air at a temperature not less than 150° or 180° Fahr., or well fumigated with the vapour of *Sulphur*, to destroy any insects or ova concealed in the texture of the linen. The cure is often retarded, and the disease conveyed to others, by neglecting to carry out these suggestions as to clothing.

### BOILS.—(*Feruncles*).

Boils are hard, painful swellings on the skin, which inflame slowly, suppurate and discharge. The matter first discharged is bloody or mixed with blood, but afterwards is pus or degenerated tissue, and at last is a hard mass termed

**a core.** Not unfrequently boils appear successively or in crops upon the same individual, continuing for months, and causing great annoyance and suffering. They are caused by disordered condition of blood, from unwholesome food, overwork, anxiety, some unknown atmospheric causes, or from depressing influences generally.

Boils may be prevented from coming to a head by gently rubbing the surface every three or four hours with the tips of the fingers, wetted with Spirits of Camphor, and then covering the spot with flannel soaked in Camphorated Oil.

In order further to prevent a recurrence of Boils, attention must be directed to the constitutional causes in which they originate. If, as is often the case, they arise from digestive derangement, abstinence from rich gravies, pastry, sweet-dishes, etc., is imperatively necessary. Correct diet, cleanliness, and healthy exercise and recreation in the open air, will do more towards eradicating a predisposition to Boils and other affections of the skin than the use of drugs.

**TREATMENT.**—The No. **Fourteen** and No. **Thirty-five** should be given in alternation, six pellets of each dissolved in as many spoonfuls of water, and taken in alternation four or more times a day, according to the urgency of the case. A cloth wet in HUMPHREYS' MARVEL WITCH HAZEL and laid on the boil will allay the pain and inflammation.

To prevent a recurrence of the boil, or a new crop, take for two or three weeks, six pellets of No. **Fourteen** at night, and of No. **Thirty-five** each morning.

### CARBUNCLE.—(*Anthrax*).

The carbuncle differs from the boil, though somewhat similar. It is a deep seated, hard circumscribed swelling, of livid hue, attended with great pain, itching, and burning heat, occurring usually on the nape of the neck or back.

It does not suppurate and discharge like the boil, but a thin acrid offensive fluid runs from *several* openings, which communicate with each other, leaving for a time a whitish mass within, which, on being discharged, leaves a deep, ugly cavity. Carbuncles arise from an infection by the micro-organism streptococcus, usually met with in *debilitated* constitutions, as the result of chronic, exhausting diseases, or severe, acute maladies; great alteration in habits, or diet; long continued fatigue; they are usually found in persons who have passed middle life, and oftener in men than in women.

The disease runs its course slowly, is attended with fever and prostration; and when the tumor is large, and seated on the head, spine or nape, is not free from danger.

DIAGNOSIS.—Carbuncle differs from a Boil in its greater size; its broad, flat shape; in usually appearing singly; in giving way and discharging from *several openings*; in the dusky redness of the inflamed integument; and in the great constitutional disturbance and irritation which accompany it.

TREATMENT.—At first, while there is considerable fever, the No. **One** should be given every hour two pellets in fluid, and after the fever has abated, and the tumor more advanced, the No. **Twenty-two** and No. **Twenty-three** should be given in alternation every two hours. Dissolve twelve pellets of each, in six spoonfuls of water, in separate glasses, and give every three hours a spoonful alternately. An application of HUMPHREYS' WITCH HAZEL OIL (COMP.), or arnica diluted, will be of relief, or a poultice of flax seed, where the tumor is very hard, hot and unyielding. The medicinal influence is the main relief, and the disease at best yields slowly.

#### WHITLOW.—(*Felon*).

This is an affection which usually appears at the end of the finger, and at others, down deep beneath the fascia, or

in the ball of the finger or thumb. It is usually attended with heat, swelling, and great pain, and is liable to reappear in the same person, unless the proper constitutional Homeopathic remedies are used to eradicate the predisposition from the system.

TREATMENT.—The NUMBER **Twenty-Two** is the proper remedy, of which dissolve twelve pellets in six spoonfuls of water, and give a spoonful every two or three hours, continuing the same from day to day. On the first indications of Whitlow being noticed, the finger should be repeatedly plunged into water as hot as can be borne, in which common salt has been dissolved for two hours, or longer; the hand should be held in a raised posture. If these means be commenced too late, poultices of flax-seed, slippery elm, or bread and milk, may be applied with advantage, to soften the swelling and hasten suppuration, and the matter had best be discharged as soon as fluctuation is clearly perceived.

ONYCHIA.—(*Inflammation of the substance from which the nails grow*).

May be induced by similar causes to those of Whitlow, and especially by an in-growing nail; or by cutting the nail down to the “quick.”

TREATMENT.—Same as for Felon.

### IN-GROWING OF THE NAIL.

May be remedied by softening it in warm water, then paring it thin on the upper surface, and cutting it down as far as may be at the middle part of the extremity, *avoiding cutting the parts which tend to grow in*. By these means the growth is diverted from the sides; since a nail will grow most where it is cut most.

## ABSCESSSES.

The term abscess is usually employed to indicate any morbid collection of matter.

An abscess may be acute or chronic. The ACUTE is always preceded by heat, soreness or sensibility of the part, followed by suppuration. The appearance of the skin changes with the commencement of suppuration. The surface, usually red, becomes livid, the pain becomes more dull and throbbing, the swelling increases in bulk, and if not too deeply seated, fluctuation may be discovered, and at this time there are almost always more or less of chills or slight rigors, succeeded by heat. After the abscess is fully ripe it assumes a more conical form or is said to point, and over this space the skin becomes livid, yellowish, and ere long bursts and the contents are discharged.

CHRONIC abscesses often begin and approach the surface, without any considerable constitutional disturbance, and the discharge is unhealthy, thin, serous, and containing flaky or cheesy substances. If the abscess is large, after the pus is evacuated and air admitted, the surrounding cyst becomes inflamed, and severe constitutional disturbance, hectic fever, etc., may arise.

TREATMENT.—We may hasten the suppurative process of acute abscesses, by applying warm poultices or fomentations, and they likewise afford some relief.

After the formation of matter is clearly announced by fluctuation, and the pointing or protrusion of some portion of the abscess, the matter should be discharged by a lancet inserted at the most depending portion of the abscess, and if the collection of matter is large, it may be necessary to repeat the process.

The No. **One** and No. **Twenty-two** should be given alternately, every two hours, during the inflammatory stage, and until suppuration occurs. Then omit



the No. **One**, and in place give the No. **Twenty-Three**, and so continue the Nos. **Twenty-Two** and **Twenty-Three**, at intervals of four hours.

For CHRONIC abscesses, the NUMBER **Twenty-two** and **Twenty-Three** should be given, six pellets in water, and four times per day in alternation.

### CORNS,—(*Clavus*), AND BUNIONS.

A CORN consists of a growth of the scarf-skin caused by the pressure or friction of tight or badly fitting boots or shoes. It not only lies on the true skin, but its pressure causes the true skin to waste, and the corn fills up the space, thus penetrating into the skin. *Soft corns* are those situated where the secretions of the skin are confined, as between the toes—keeping the corn moist and soft.

A BUNION is an enlargement of the sac, over the joint of the great or little toe, chiefly the former, with more or less deformity of the joint. It is caused by the *pressure of narrow-pointed boots or shoes*, throwing the great toe over or under the contiguous toes; in this way a sharp angle is made on the inner side of the joint of the great toe, on which the bunion is formed. Both corns and bunions give rise to much pain, redness, and swelling of the part, which soon subside on removal of the cause.

These troublesome excrescences are far more liable to form on the feet of some persons than others, thereby showing a constitutional predisposition, which is a proper subject of medical treatment. Tight shoes, and especially *high heels* which throw undue weight upon the ball or the toes of the foot, commonly give occasion to their formation, and hence frequent changes of boots or shoes are of advantage. It is far from wise to constantly wear the same covering for the feet. Heavy thick boots or shoes for winter and wet weather, Arctic rubbers for snow and severe cold, light shoes for summer, and slippers for evening and

house wear. This variety of covering is not only suitable and comfortable, but relieves the feet from constant pressure on the same or suffering parts, and withal is economical. Often washing of the feet, and frequent change of stockings are also necessary to a perfect cure.

TREATMENT.—When CORNS are inflamed and troublesome, soak the feet well in warm water, with two ounces of bicarbonate of Soda to the gallon, for half an hour; then pare the corn, or raise its hard head from the edge gently with the finger-nail, or some convenient instrument; in the centre will be found a white spot or root, going deeper in; pick it out with the point of knife, and afterward wear a piece of plaster with a hole in the centre over the middle of the corn. The free and frequent application of HUMPHREYS' MARVEL WITCH HAZEL OR WITCH HAZEL OIL (COMP.) and following the bathing up for several nights, will give prompt relief.

Hard corns on the sole of the foot are best treated by repeated filing with a rasp.

Soft corns are best treated by carefully cutting off the thickened skin with sharpened scissors, then applying HUMPHREYS' MARVEL WITCH HAZEL OR WITCH HAZEL OIL (COMP.), and always wearing a layer of cotton-wool between the toes, changing the wool daily.

Besides, take of the No. **Twenty-two**, six pellets each night, and of No. **Thirty-five**, six pellets each morning for a week or more, to break up the predisposition to their formation.

In the case of BUNIONS the direction of the toe must be changed by wearing properly-shaped boots, made with the inner side of the sole straight from the toe to the heel. If irritation be accidentally excited in the part, a warm foot-bath should be used, and afterwards the HUMPHREYS' MARVEL WITCH HAZEL OR WITCH HAZEL OIL (COMP.) freely used for two or three days. Should matter form, a linseed-meal poultice will be suitable.

CHILBLAIN.—(*Pernio*).

Chilblains are a low kind of inflammation, mostly affecting the hands, or the sides, soles and heels of the feet, and caused by sudden changes from cold to heat; especially in weakly persons of languid circulation, in children, scrofulous people, and in old age. A chilblain begins with swelling, slight purplish redness, pain, tingling, burning, itching, and may go on to form a blister, followed by ulceration. “Chapped” or “cracked” hands, during frosty weather, is of the nature of chilblain, and requires similar treatment.

TREATMENT.—Dissolve ten or twelve pellets of No. **One**, in as many spoonfuls of water, of which give every hour to children a tea, and to adults a large spoonful until the itching and irritation are relieved. Then give of No. **Fourteen**, four pellets, three times per day.

Bathe the parts with HUMPHREYS’ MARVEL WITCH HAZEL or with the HUMPHREYS’ WITCH HAZEL OIL (COMP.). It will promptly relieve the burning and irritation, and may be used in conjunction with the other Remedies named.

PREVENTIVES.—As Chilblains generally occur in persons whose nutrition is defective, free use of wholesome nutritious diet, is necessary to prevent their recurrence. Pork, salted meats, and all irritating or indigestible articles of food, should be excluded from the dietary. Extremes of temperature are to be avoided; and suddenly approaching the fire after coming in from the cold, or warming the feet on the fender, or the hands close to the fire.

## FROST BITES AND FROZEN LIMBS.

When any portion of the person has been frost bitten or frozen, the part, ear, nose, cheek, fingers or toes, should immediately be rubbed in snow or ice cold water, and this

should be carefully continued until the part becomes red and the sensation and circulation are restored. Then the best application is WITCH HAZEL OIL (COMP.). Moisten a fine rag or some cotton batting with the same, and envelop the frost bitten part with it, and then from time to time, remoisten and apply it, as it gets dry, until the part is restored. No. **Fourteen**, six pellets, four times per day, will aid in restoring the part.

# DISEASES OF THE HEAD AND NERVOUS SYSTEM.

## HEADACHES.

*Headaches* are various in their character and are produced by a variety of causes. It is less frequently a disease itself, than a symptom of some more general affection. Sometimes it is comparatively trivial, at other times of very grave importance, often interrupting any constant vocation of the patient, causing great suffering, and prostrating the system so frequently as to rapidly undermine the general health. With some persons, the slightest indiscretion in diet, or deviation from ordinary quiet habits, is followed by an attack of headache. The pain may be located in a single part, or involve the entire head; and is often accompanied with extreme nausea and painful retching and vomiting. The attacks are often provoked by some exposure, excitement, or error in diet, and sometimes they return at pretty regular intervals of seven or fourteen days. They may likewise be of congestive, rheumatic, bilious, catarrhal, or nervous origin.

Congestive headaches occur in plethoric persons of full habit, and are accompanied by a sense of fulness and throbbing in the head, red or very pale face, redness of the eyes, with sense of soreness on turning them, and often intolerance of light.

In bilious headache there is often coated tongue, bad taste in the mouth, and the pain is dull, aching or racking,

sometimes moving from one part to the other, while the scalp may be sore and bowels constipated. Catarrhal headaches are indicated by dull, heavy pains across the forehead and upper part of the nose, attended with obstruction of the nose or fluent discharges.

TREATMENT.—Persons who are subject to headaches should abandon the use of coffee, and also of strong tea, as the use of these beverages often contributes to keep up the disease, and in some cases alone cause it. They should live regularly and temperately, and avoid as far as possible the known or exciting causes of the disease. Beside this regimen, they should take each morning six pellets of No. **Thirty-five**, and at night six more of No. **Ten**, as a preventive, and to eradicate the predisposition to these attacks.

When a paroxysm of headaches comes on, if it has the symptoms of congestion mentioned above, the No. **One** and No. **Thirty-five** should be given every hour, alternately, in fluid.

If the attack indicates a bilious condition, the No. **Nine** and **Tonic Tablets** should be given every hour in alternation, two Tablets at a dose. Should the attack commence with blindness, soon followed by nausea and vomiting, or other severe symptoms, the medicines are best when dissolved in water, and given every half hour, or even more frequently. Should there be heat, fever or throbbing of the vessels of the head or temples, substitute the No. **One** for No. **Ten**, and continue in the same manner.

For the usual form of SICK-HEADACHE, as it is generally termed, with nausea, vomiting, prostration, often intolerance of light or noise, the No. **Nine** and No. **Ten** should be given every hour or half hour, in alternation, until relieved.

*Headaches in Females*, occurring just before or during the monthly period, will be relieved by taking the No.



**Eleven**, either alone or in alternation with No. **Thirty-Five**, especially if the periods are painful or too profuse, Headaches from constipation will be relieved by using the No. **Ten**, six pellets night and morning.

Old, long-standing headaches, requires time and perseverance, but can always be accomplished by the persistent use of the remedies before mentioned.

Persons subject to headaches, find, on arising with the symptoms of a headache in the morning, or at other times, that by taking a glass of *lemonade* the impending attack is warded off. The free use of this beverage or of lemon-juice has often prevented, and in some instances seems to have cured old and inveterate headaches. It is an agreeable remedy and well worth a trial.

### VERTIGO OR GIDDINESS.

This affection may arise from a variety of causes, and so is cured by a variety of remedies. It may be a transient condition, or become chronic and comparatively permanent. It often arises from plethoric or full habit; from overloading the digestive organs, or from debilitating discharges, or from the use of narcotics.

TREATMENT.—When connected with full habit, red face, sparks before the eyes, etc., the No. **One** is the remedy. If there is indigestion or overloaded stomach, take No. **Ten**. If there have been debilitating discharges, such as diarrhea, leucorrhea, No. **Twenty-four**, or in some cases No. **Twenty-eight**. Chronic vertigo, referable to no immediate producing cause, requires the No. **Thirty-five**; dose, six pellets, two or three times per day.

### APOPLEXY.

What is termed a fit of apoplexy, is a sudden loss more or less complete of consciousness and motion, the patient

sinking down as if dead, though the respiration and action of the heart continue in a somewhat irregular manner. It is different from spasm, the hands are not clenched or extremities rigid, but apparently dead and without motion. It is occasioned by an effusion of blood or of serum upon the brain, or from so intense a degree of congestion, as to paralyze the action of this organ. It is always the expression of some constitutional defect or tissue-depravation:

There is a popular error, shared to some extent by the profession, that apoplexy is the frequent cause of sudden death; and that persons with a short, thick neck and red face are most liable to it. It is true that such persons often die suddenly, but the suddenness of their death is generally due to heart-disease. A man with a red face has no more blood in his head than another with a pale face; and if blood is poured out into the brain it is because the diseased blood-vessel could no longer delay the fatal mischief. It is, then, the person with diseased arteries in whom apoplexy is most likely to occur, and this may exist in those who are pale and thin and have long necks. Apoplexy is more frequent as a cause of death after age of 50; the gradual degeneration or ossification of arteries common to old age rendering them inelastic, and as the blood is forced in them by the heart's action, they give way. Intemperance, excessive eating or drinking, uncontrolled passion, tight clothing around the neck, too close mental labor, etc.—all tend to cerebral congestion—so do diseases affecting the heart, kidneys, or blood-vessels of the brain, suppressed hæmorrhages, or menses. It is more important to know and arrest the premonitory symptoms, as after the attack has become fully developed, but comparatively little can be done by way of treatment. The symptoms which point to an attack, are these: Great disposition to sleep; feeling of heaviness; dimness of sight; buzzing in the ears; hardness of hearing; heavy, deep sleep and loud snoring; yawning

and fatigue after slight exertion; vertigo or giddiness; irritable disposition; loss of memory; forgetfulness of words or things; double or very acute vision; difficulty of swallowing; numbness, torpor or pricking sensation in the extremities; rush of blood to the head, with beating of the temporal arteries; red face and quick, hard, tense pulse. These symptoms are indicative of severe congestion of blood to the head, and unless arrested, may result in an effusion or fit of apoplexy.

TREATMENT.—This condition requires, first the use of the No. **One**, if the symptoms are at all urgent; give six pellets every one or two hours until the oppression and sense of fulness is somewhat relieved, and in some cases this remedy will alone be sufficient for the time. Then commence and give the No. **Thirty-five** and No. **Ten**, four times per day, six pellets at a time, in alternation, No. **Thirty-five** before breakfast and supper, and No. **Ten** before dinner and at bedtime until entirely relieved. Then, to prevent a return, the No. **Thirty-five** should be taken each morning, and the No. **Ten** each night for some weeks, six pellets at a dose.

When a person falls down in a fit of opoplexy, (which may be known from *drunkenness* by the absence of the smell of liquor in the breath, and from *epilepsy* by the absence of the peculiar scream, and frothing at the mouth, and convulsion), cold applications should at once be made to the head, and the feet should be immersed to the knees, if possible, in quite warm water, and the No. **One** and No. **Thirty-five** given, dissolved, six pellets, in a few drops of water, at intervals of every half hour, alternately, until animation is restored, and then at longer intervals as the patient improves. Afterwards, the No. **Ten** and No. **Thirty-five** may be continued to prevent a recurrence of the attack.

ACCESSORIES DURING A FIT.—1. The patient should be im-

mediately conveyed to a large apartment where the cold air can freely circulate around him. 2. The neckerchief, and bandages of every kind, loosened, and the patient placed in a warm bed, with the head moderately raised. 3. Warmth should be applied to the extremities and arm-pits, cloths wrung out of hot water, and renewed as soon as they become cool, to the head; and heat applied to the pit of the stomach.

**AFTER A FIT.**—Should the patient recover from the fit, great and unremitting care must be observed to prevent another attack. The diet should be light, but nourishing; milk, light puddings, cooked vegetables, fish, etc., are extremely valuable; a full animal-diet should not be allowed till all fear of a relapse is passed; and stimulants should almost invariably be avoided. Physical and mental exertion and excesses of every nature; fits of passion or excitement; sudden changes of temperature, over-heated rooms, warm baths, wet feet, exposure to a hot sun, violent emotions, etc., as well as errors in diet must be uniformly avoided by those predisposed to apoplexy. Moderate exercise of the muscles is a remedial agent of high value; it tends to promote a more active circulation through the entire system, and, consequently, to diminish the pressure on blood-vessels which a little extra force might cause to give way. If active exercise cannot be taken, frictions performed by a second person by means of towels or flesh-brushes over the surface of the body and the extremities are necessary.

## CONGESTION, OR RUSH OF BLOOD TO THE HEAD.

Persons of full habit, and who lead a sedentary life, are subject to what is termed a rush of blood to the head. It is brought on or excited by intense or long-continued mental application, want of exercise, and often by too free indulgence in stimulating food, wine or alcoholic drinks.

The symptoms are: a sense of fulness in the head and neck; unusual beating or throbbing of the arteries throughout the body and head; heat, redness and bloating of the face, or sometimes paleness and puffing of the face; attacks of giddiness or vertigo, more after sleeping or sitting in a warm room, or from exposure to the sun; frequent headache, especially in the forehead, worse on coughing or stooping; buzzing or noise in the ears; oppressed breathing; dry, enlarged or reddish tongue; constipation; drowsiness by day and sleeplessness at night. These symptoms may come and go with the causes which excite them, or become a more or less permanent condition.

TREATMENT.—If the symptoms are urgent, dissolve twelve pellets of No. **One** in six spoonfuls of water, of which take a spoonful every hour, until relieved; then, each morning, take six pellets of No. **Thirty-five**, and each night six pellets of No. **Ten**, until every trace of the affection has disappeared.

### INFLAMMATION OF THE BRAIN.—(*Encephalitis*; *Meningitis*).\*

The manifestations of this disease are varied very much by the age, sex and temperament of the patient, the location of the affection, and the causes which have produced it. Children, from the greater delicacy and relatively greater size of the organ, are far more liable to it than adults, and from greater delicacy of nervous organization, women are perhaps more so than men.

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\* By *Encephalitis* is meant inflammation of the *Brain*, and its *membranes*, the term being only used when it is impossible to locate the exact seat of the inflammation. *Meningitis* is the term applied to inflammation of the *Brain-membranes* alone. *Inflammation of the Brain*, refers to inflammation of the *brain-substance* itself, which is of comparatively rare occurrence, and always limited to one part of the brain.

When the coverings or tissues of the brain are affected, the pain is more intense, and the symptoms more violent than when the substance of the organ is the seat of the disease; while in the latter case, the symptoms of dullness, coma and tendency to paralysis are more prominent.

CAUSES.—Whatever tends to overtask and excite this organ, is liable to induce the disease, such as extremes of heat or cold; abuse of ardent spirits; intense mental emotions; excesses of all kinds, or concussions of the brain; and in children especially, falls or blows upon the head, exposure to the sun, and overtaking their faculties. And it may also be the result of repelled scalp-eruptions, or a metastasis of disease from some other organ.

The SYMPTOMS, which usually precede the attack for some days, are those indicating congestion of the blood to the head; sense of weight, fulness and pressure in the head; occasional darting or shooting pains; ringing in the ears and feverish symptoms. Farther on, the giddiness and sense of weight in the head are increased; pulse quickened, with some heat, restlessness and tossing at night; the mind becomes irritable, the patient peevish and annoyed at trifles; and there may be stupefaction and drowsiness, and muttering delirium or great excitability. The patient may be wild and frenzied at the slightest light or noise, with attempts to jump out of bed or run away; the eyes may be wild and bloodshot or turned up and distressed at the slightest approach of light. The fever varies according to the seat of the disease and the excitability of the patient; and the pulse varies from time to time, at one time quick or irregular, at another full or even slow. A very quick or very slow pulse indicates danger. Sometimes there is retention of urine, constipation, retracted abdomen, muscular twitchings, stupor or incontrollable vomiting; as the stupor increases convulsions commence, and the case sooner or later ends fatally.



In children, as only the objective symptoms can be known, it is of more importance to recognize them early. They are observed to manifest a heaviness of the head, by holding it backward when walking; frequently to hold the hand to the head from pain; to fall easily when walking or running; to dread the light; and to be easily annoyed or violently out of temper at trifles; or to have spells of vomiting and constipation, and to be drowsy or very wakeful, with startings during sleep.

As the case is more developed, the child bores with its head into the pillow; wants to lie down again when raised, and screams when the light shines in its face, or from any noise; or there is heavy, deep sleep, with great heat in the head; swelling and redness of the face; violent throbbing of the arteries of the neck, or great agitation and tossing about, especially at night; the eyes may be red and sparkling, convulsed or fixed, with dilated or very much contracted pupils.

TREATMENT.—The No. **One** and No. **Thirty-five** are our main reliance, and they should be given, dissolved in water, at intervals of every hour, or two hours, according to the urgency of the case. Dissolve twelve pellets of each of these remedies in six large spoonfuls of water, separately, and give to adults a tablespoonful, and to children a teaspoonful, alternately, from the two, at the intervals above mentioned, and so continue until the case is relieved.

Wet hot cloths may be applied with advantage to the head, and the feet from time to time bathed in quite warm water, if the condition of the patient admits it. Room should be well ventilated, kept perfectly quiet and somewhat darkened. Beef-tea, strong broths, milk and soda-water, but no solid food should be given. Cold water or other simple liquids may be freely given—and great caution exercised during recovery.

DROPSY OF THE BRAIN.—(*Hydrocephalus*).

This affection is not uncommon among small children, and sometimes even adults. It may come on as the sequel of scarlatina, inflammation or other acute disease of the brain, or in consequence of falls or blows upon the head, or be excited from the long-continued irritation of teething; or it may arise as an independent or idiopathic disease in peculiar subjects. Scrofulous children with large heads and precocious intellects, whose fontanel remains a long time open, are peculiarly liable to it. In some cases it comes on so insidiously that the premonitory symptoms escape attention altogether, while in others the impending disease is indicated by these symptoms: Hot skin, quick pulse, especially at night; the child is peevish and dislikes to be raised up when lying down, and sometimes has fits of screaming, redness of the face and eyes, and even at times squinting, convulsions or stupor.

When the disease comes on in the more insidious form, the earlier indications are: languor and easy fatigue on the slightest exertion; aversion to movement; tottering gait, and great liability to fall; dislike of movement; indications of pain in the back of the head and neck; the head is hot; eyes look inflamed; pupils contracted; the stomach is drawn in and very irritable; easily vomiting when the patient sits or is raised upright; scanty urine and constipated bowels.

At a more advanced stage the child loses all sense of pain; lies quiet unless disturbed; drowsiness or stupor increases; the head sinks or bores into the pillows; the eyes half closed; pupils dilated or immovable, or sometimes drawn to one side or attended with double vision; the vomiting becomes less or ceases, and the child may eat, but emaciation progresses rapidly. Following these symptoms, convulsions more or less violent come on; constant moaning and entire loss of consciousness; the eyes are dim, glazed

and turned upward, pulse quick; the upper and lower extremities relaxed; the abdomen drawn up and breathing irregular, and the scene may terminate in a very violent convulsion.

TREATMENT.—So soon as any symptoms pointing to dropsy, or even irritation of the brain are manifested; the No. **One** and No. **Thirty-five**, should be called into use, and two pellets be given alternately, in fluid, from these two remedies at intervals of two hours, until the danger has been averted.

Should the symptoms have become more decided, it will be best to dissolve twelve pellets of No. **One** and the same of No. **Thirty-five**, in as many teaspoonfuls of water, and from these two give alternately, every hour a spoonful, until the desired relief is obtained.

Benefit will be derived from frequently bathing the feet in quite warm water, and afterwards wrapping them in warm flannels, and applying cloths wrung out of cold or ice water to the head. A bag of pounded ice applied to the head, is often very serviceable; and these measures should be continued perseveringly to the desired end. In extreme cases the alternate use of No. **One** and No. **Twenty-five**, given as above, is advisable; but, in general, the first mentioned remedies will prove sufficient.

#### CHRONIC DROPSY OF THE BRAIN.—(*Hydrocephalus*).

This form of the disease generally comes on insidiously, though it may be the result of the acute attack. The head of the child gradually enlarges, while the face retains its natural size; and in quite young children the bones of the cranium may separate, and the presence of fluid even be detected from its fluctuation. It generally occurs within the first year, before the sutures and fontanelles are closed, so that the bones yield to pressure from within. **Infants**

are sometimes born hydrocephalic, when it is an occasional cause of difficult labor.

SYMPTOMS.—The *premonitory* indications of this disease are not very distinctive: there may be squinting or rolling of the eyes if the disease be congenital, followed by Convulsions and enlargement of the head.

The most marked features are—a disproportion between the size of the skull and that of the face, the fontanelles are wider than usual, and the bones feel thin under pressure of the fingers. Emaciation is generally present through non-nutrition; in some cases there is an unnatural fat condition. If an infant, he sucks well, even voraciously, and yet he does not grow; his bowels are constipated, and his motions unhealthy. The gradually-increasing head soon attracts notice: the anterior fontanelle pulsates; there is heat of the head, and the child becomes very restless. Fluctuation may be felt by applying the hand to the top of the head; the hair ceases to grow as usual; the face appears small and triangular; the countenance is dull, having an aged appearance; and the patient is continually wishing to lie down. In fatal cases, the senses become impaired; Paralysis sets in; and the patient dies from exhaustion, Convulsions, or Spasmodic Croup, to which such children are liable.

The duration of the disease varies from one to eight, or even ten years. Should effusion be arrested, the accumulation of serum already present remains, for it is never absorbed.

CAUSES.—Chronic Hydrocephalus is usually associated with the scrofulous cachexia; sometimes it follows Scarlatina, Hooping-cough, or Measles. The most common exciting causes are—undue exposure to heat or cold, injuries of the head, suppressed eruptions, or extended inflammation of the ear. “One warning may be learned from this disease, namely, that it is said to be most common in the children

of parents addicted to drunkenness, and from this cause it often runs in families" (*Aitken*).

In some cases, the intellect is preserved for a considerable period, and the child may live for years, with entire loss of some of the senses, as for instance the sight, the general condition being, otherwise, of tolerable health. Oftentimes the more immediate cause of death may be from some acute, inflammatory affection, consumption or ulceration of the bowels.

TREATMENT.—But little can be hoped for in the more confirmed case of this disease. The No. **Thirty-five** and No. **Twenty-five**, may be given, two or three times per day, as palliatives, in alternation but a cure can scarcely be expected unless in the earlier stages.

#### CONVULSIONS.—(*Spasms, or Fits*).

Convulsions are very justly dreaded among children, not only because there is some danger attending them, but from their suddenness, and the evident distress and suffering of the patient. Their danger depends much upon the cause which has produced them. In some families the children have fits, as they are called, from very slight causes, and in such cases their appearance need not excite great alarm. Convulsions are dangerous when they set in after a fall, blow or injury upon the head, or after long continued disease of the brain, or after dropsy of the brain has set in; such are very frequently fatal precursors. They are of less consequence when they come on as the result of difficult teething, excessive pain, anger, earache, etc. Often the patient is better after the convulsion has passed over. Not unfrequently a severe attack of small-pox, scarlatina or measles is ushered in by convulsions. Though such cases are severe, they not unfrequently terminate favorably. If spasms appear towards the end of acute eruptive diseases,

they are symptoms indicating a dangerous, if not fatal transition to the brain. The most common and among the most dangerous convulsions in children, are those arising from having eaten indigestible substances, such as raisins, oranges, dried-apples, nuts, green fruit, and similar indigestible articles, as the fit here depends upon the presence of the injurious substances, which it may be difficult to neutralize or dispose of. Yet even in these, the proper means will, in most cases, prove effectual.

The phenomena of convulsion are well known. They often commence with a holding back of the head; straightening out of the arms and legs; holding the breath; tightly clenching the hands; twitching of the muscles of the face; frothing at the mouth; involuntary evacuations, etc., after which the patient sinks into a deep sleep, lasting one or two hours.

**TREATMENT.**—When children are observed to have some degree of fever or heat of the head, and to twitch, or suddenly start on going to sleep, or attempting to do so, there is danger of convulsions, and the No. **One** should be given, two pellets dry in the mouth, and repeated hourly until the surface becomes cool, and quiet sleep is produced. When a convulsion has come on, the first thing is to get the child's feet into warm water as high as the knees, if possible, which may be continued for five or ten minutes, and apply cold water by means of cloths wrung out of cold or even ice water to the head. Should the spasm not pass off from these applications, a small stream of cold water may be poured upon the head for a few minutes only, or the bath may be general; but these measures rarely will be required. Give also upon the tongue, two pellets of No. **Thirty-three**, and afterwards repeat it every hour in water. The child, after coming out of the bath, should be wrapped in warm flannels, with head quite high. Should there be fever, give the No.



**One**, the intermediate half hour between the portions of No. **Thirty-Three**, until the fever abates. This will also be the appropriate treatment, should you have reason to suspect the invasion of small-pox or scarlatina as the cause of the disease.

If the convulsion has been caused by eating indigestible substances, in addition to the baths above advised, lose no time in giving an *injection of tepid water*, in which a spoonful of salt has been dissolved, and repeat it if needful until full and free evacuations occur, giving the No. **Thirty-three** and No. **Ten**, alternately every hour.

If irritation from teething has been the exciting cause, the No. **Three** should be given alternately with No. **Thirty-three**, at intervals of an hour, and until the immediate danger is passed, and then the treatment should be continued as directed for teething.

**COUP DE SOLIEL.**—(*Insolation, Sun-Fever, Sun-Stroke, Heat-Stroke*).

A paralysis of all the functions of the brain, allied to apoplexy.

**CAUSES.**—Sun-stroke is generally caused by fatigue or nervous exhaustion in a hot dry atmosphere, and want of free perspiration. Though most common from direct exposure to the rays of the sun; it may also be caused by a heated atmosphere, combined with breathing vitiated air in crowded apartments, such as barracks, upper lofts of warehouses, hot close nurseries, etc.

**SYMPTOMS.**—Giddiness, faintness, thirst, sometimes headache, listlessness and torpor, with a desire to lie down, succeeded by more or less sudden and complete insensibility; the skin is hot and dry, the breathing rapid, the pupils of the eye contracted, the face pale, and an attack of vomiting or convulsions may usher in complete stupor.

Just before death the pulse becomes fluttering, the breathing irregular and gasping, and the pupils dilated. Death may occur from five minutes to a few hours after the symptoms have set in. The patient is not free from danger until the skin gets cool and moist again. After recovery from the first symptoms, there is a great tendency to paralysis or various forms of insanity, so that a person who has once suffered from real sun-stroke, is never quite as sound a man again.

ACCESSORY TREATMENT.—If there be *no convulsions*, strip the patient, and dash cold water over him by the bucketful (in severe cases, rub the skin with pieces of ice, if it can be had), especially around head and shoulders, till temperature of body is reduced below 100°. *Camphor* should be inhaled and given on sugar—or a teaspoonful of brandy and water (half-and-half) may be given instead.

If there be convulsions, place patient in a tepid bath, and add cold water till the body temperature is below 98°.

MEDICAL TREATMENT.—Same as for Apoplexy (page 239); Convulsions may be met with **NUMBER Thirty-three**, (see page 248).

PREVENTION.—Light and loose clothing, avoiding pressure on veins of neck. *Flannel* tends to prevent chills. Avoid liquor, over-fatigue, and all irregularities of habit and living.

### PARALYSIS.—(*Palsy*).

A limb or portion of the body is said to be paralyzed when it is not under the control of the will, or when the will-power is not able to move or control it. The paralysis may be only partial, or it may be complete, and may affect the nerves of motion only, or may extend to those of sensation as well, so that the part has neither sensation nor power of motion. Sometimes the disease affects only a

single limb, and at others the entire one side of the body, or again only the lower extremities. It may be caused by disease of the brain or spinal cord, from injury to, or pressure upon a nerve-trunk, or from the action of a poison. But in some, perhaps most cases, it is preceded by symptoms which, though often unnoticed, should excite attention. These are a sensation of numbness or pricking in one of the limbs, or the entire side, readily going to sleep, as it is termed of the part, coldness or undue paleness of the part, or slight convulsive twitching or jerking of the part or limb involved. When such symptoms are frequently repeated without apparent cause, they should excite apprehension.

The CAUSES, aside from those mentioned above, are long continued strain upon the nervous system among men of business, exhausting drains upon the system, and a too luxurious or indolent mode of life, or other similar causes of apoplexy.

There are different forms of Paralysis, some of which may briefly noted; viz.:

*Hemiplegia* ("Paralytic Stroke") is the most common form, and affects only one side of the body, most commonly the left side. It indicates disease of the brain on the opposite side to that paralysed. If one limb only is paralyzed, it is usually the arm. The paralysis may be complete, or some power of motion may be left. The eye remains permanently open, the face is drawn to the sound side and hangs down on the affected side; food accumulates in the cheek, there is loss of power of chewing on that side; speech is imperfect, and taste is lost in the front two-thirds of the tongue. Sometimes, there is dropping of the upper eyelid, dilated pupil, rolling outwards of the eyeball and indistinct vision. The chief causes of hemiplegia are apoplexy, obstruction of brain blood-vessels and consequent cerebral softening.

*Paraplegia*, is a paralysis, more or less complete, of the

lower half of the body, and may be due to disease of the spinal cord and its membranes; to reflex action from a sensitive nerve, (such as from the irritation of teething, or worms in children); or from wounds; affections of the womb; from urinary complaints, or emotional paralysis. It usually begins slowly, with weakness, numbness and tingling of the feet and legs, the weakness increases until there is loss of sensation and motion in the legs, paralysis of the bladder and sphincter muscle of the bowel, with involuntary movements and spasms of the legs.

Other forms of Paralysis are *General Paralysis*, or *Paresis*, or "Paralysis of the Insane"; *Wasting Palsy*, not common, arising from fatty degeneration of the muscles, is often hereditary, and attacks all ages, but men most frequently; *Locomotor Ataxy*, most common in men between 35 and 50, and caused by exposure to cold when fatigued, by rheumatism or gout, or, most commonly, by sexual excesses; *Paralysis Agitans*, or "Shaking Palsy", an involuntary trembling or jerking movement of the muscles, with diminished muscular power commencing in hands, arms or head and gradually extending over the body; *Writer's Cramp*, attacking muscles of the thumb and fingers which hold the pen; and various forms of *Local Paralysis*, affecting particular sets of muscles.

*Facial Paralysis*, most often occurs from exposure to cold, or from irritation from decayed teeth; comes on suddenly and without pain, and is first discovered by the patient when he begins to eat, or is told by a friend that his mouth is awry. There is a greater or less degree of the facial appearance noticed under the head of *Hemiplegia*—but the affection is in most cases quite independent of any disease of the brain, and is usually curable with facility.

*Infantile Paralysis*, is a form of palsy, of obscure origin, occurring in children during teething—i. e. from the sixth month till the third year. It occurs suddenly, and never

extends from the limb first affected, to others. There may be slight fever and convulsions; and when consciousness returns, a foot, a hand, a leg, or an arm, or both legs, may be found to be paralysed; but never a leg and arm on the same side; the bladder and bowels are never paralysed. Sometimes the disease ends in a day or two, in complete recovery, but oftener it is stationary and permanent. After a time, the affected limb becomes soft, relaxed, flexible, and gradually withers. The skin becomes thin, fat is absorbed, muscles waste, and even the bone is diminished. In a year's time the affected limb is much smaller than its fellow, the skin livid, and chilblains and ulcerations are easily formed on it. The general health may remain unimpaired and the sufferer live many years.

**TREATMENT.**—For the premonitory symptoms: tingling, pricking or numbness, frequent going to sleep of the limb or parts, No. **Fourteen** is appropriate, and may be given, six pellets at a time, and repeated before each meal, and on going to rest.

If there is fullness and redness of the face, heaviness of the head, and disposition to sleep, give No. **One**, six pellets at a time, in water, every two hours, for ten or twelve hours, and then give No. **Ten**, prepared in the same manner, in alternation with it, at somewhat longer intervals. For old cases, No. **Fourteen** may be given each morning, and No. **Ten** at night; or, if the case is more recent and hopeful, No. **Fourteen** may be given, six pellets, morning and afternoon, and the same of No. **Ten**, at noon and night.

## EPILEPSY.

This disease is characterized by convulsions, returning at intervals, attended with sudden and complete loss of consciousness and sensibility, and spasmodic contractions of

the muscles. These convulsive fits, which recur without any special regularity, last from one to twenty minutes and are followed by exhaustion and deep sleep.

The fit is often unattended by any noticeable premonitory symptoms, or these are too brief to allow the patient to remove to a convenient place, or even to give an intimation of what is about to happen. In other instances, an approaching seizure is clearly indicated for many minutes, or even hours, before its actual occurrence. The warning is variable in different cases, often consisting of such symptoms as headache, shooting pains, giddiness, indistinctness of vision, sparks of various colors, humming noises, or loud reports, strong odors, sneezing, strange tastes, hoarseness, irritability, gloomy mood, spectral illusions, etc. But the most striking premonition is that called the *aura epileptica*, a sensation compared to a stream of warm or cold air, to the trickling of water, or to the creeping of an insect, which commences at the extremity of a limb, and gradually runs along the skin towards the head; or, occasionally, it gets no further than the pit of the stomach; and, as soon as it stops, the fit occurs. A knowledge of these circumstances is important, as, in some instances, time is afforded to interpose remedies that may avert the paroxysm, or at least to secure the patient's safety during a fit.

THE FIT.—The patient utters a loud shriek or scream, and falls suddenly to the earth, convulsed and insensible. The cry is peculiar and often terrifying, not only to mankind, but also to the brute creation. The convulsive movements, especially of the head and neck, are often very extreme, one side being frequently more affected than the other; there is violent closure of the jaws; the tongue is liable to be bitten; a foam issues from the mouth, often colored by blood; the eyes quiver and roll about, or are fixed and staring; the hands are firmly clenched, and the thumbs bent inwards upon the palms; urine, etc., sometimes



escape involuntarily; the breathing is impeded by spasms of the larynx, and performed with a hissing sound; the cheeks and lips are of a deathly pallor; the veins of the neck and forehead are greatly distended, the heart acts tumultuously, and death seems inevitable. Gradually, however, the symptoms remit, and the patient is left insensible and apparently in a sound sleep. A fit rarely lasts longer than from one to three minutes, although the painful nature of the spectacle makes it appear longer to a bystander.

**SYMPTOMS FOLLOWING A FIT.**—Some few patients recover perfectly in a few minutes; some regain consciousness and then sink into profound sleep; but more frequently consciousness is not immediately recovered, the slumber succeeding the struggles without any lucid interval. On emerging from the slumber, the patient may merely feel languid and inert, or like a person stunned, or in a state bordering upon idiocy, unconscious of what has passed.

The paroxysm may soon return again if the occasioning cause is still in action; but generally in chronic cases, at intervals varying from a few days to several weeks. Sometimes patients have several fits in succession, and then escape them for several weeks.

But few persons die in a fit, but they may be repeated so frequently as to induce a comatose state, from which the patient sinks. Long continuance of the disease rarely fails to destroy control of the appetite and passions and to arrest the mental faculties, and idiocy; sometimes general paralysis, more or less complete, is the result.

When the disease commences before the age of puberty, it is more amenable to the proper treatment than afterwards, though even in the latter cases, homeopathic treatment is able to do very much by way of mitigating and prolonging the intervals between the convulsions, and in many instances to effect a cure.

The most frequent *exciting causes* are: A hereditary derangement of the nervous system.—Hysteria; chronic alcoholism or syphilis in parents, physical and psychical prostration from any cause. The age at which the attacks most frequently commence is from the tenth to the twentieth year, when the important change of puberty takes place. The other most frequent period is from the second to the tenth year, during which the permanent teeth are cut.

Fright, fits of rage, overstraining the mind; gastric disorders, the irritation of worms (especially *tænia*), menstrual irregularity or suppression, repelled eruptions—especially those about the head—and the sight of other epileptics, are also exciting causes.

**TREATMENT.**—During a fit the patient should receive only such attention as will prevent injury from the convulsive movements. Remove or loosen the cravat from the neck, and stays from the body, and prevent the limbs from being bruised, and if the tongue is liable to be lacerated, something may be inserted between the teeth to prevent it. If the breathing is arrested for a dangerous period, by spasm of the respiratory muscles, cold water may be sprinkled in the face to return it. The body should be placed in a horizontal position and the head elevated. After the patient has come out of the fit, he should be allowed to rest quietly an hour or two until he awakes.

The medical treatment consists in giving six pellets of the **NUMBER Thirty-five** each morning, and the same of No. **Thirty-Three** each evening, which should be continued for several weeks or even months.

Persons subject to fits should be very particular in regard to diet. Eat only plain food, easy of digestion, and in great moderation. Stimulants should be entirely avoided.

CHOREA.—(*St. Vitus' Dance*).

This disease mostly affects children of nervous temperament, between the ages of five and fifteen years, and is characterized by strange and unusual movements and jerkings of the limbs, or of single muscles.

Generally, for some months previous to the full manifestation of the disease, the child is troubled with constipation, oppression of the stomach or chest, vertigo or headache, occasional flushes of fever at night, palpitation of the heart, nervousness and irritability of temper. Involuntary motions generally commence with grimaces or slight motions or drawings of the face; these gradually become more decided and extend by degrees to the extremities, arms, hands or legs, and even to the entire body. When the limbs are affected, the gait becomes difficult, awkward or unsteady. The arms fail to obey the will, and then involuntary motions or gestures, and if the tongue becomes involved, the act of deglutition is impeded, and the speech becomes stammering or difficult. The involuntary motions are constant during the waking hours, and some cases are attended with difficult respiration, pain in the limbs, frequent micturition, confusion of ideas, and loss of memory.

It is usually unattended with danger, and often subsides at the age of puberty, but it may also become permanent, and be attended by perversion or permanent weakening of the mental powers. It has frequently been caused by repelled eruptions, such as tetter, scald-head or itch, also from depressing emotions, fear, terror, or from masturbation, or the irritation of worms. Overtaxing the mental powers at school, and too long school hours are most frequent causes.

**TREATMENT.**—The NUMBER **Thirty-Three** and No. **Thirty-Five** will usually be found effectual. Give two to six pellets of the latter at night, and the same from the

former each morning, and with the removal of the exciting cause, the health will gradually be restored.

### TETANUS.—(*Lockjaw*).

A disease in which the percentage of fatalities is very large, and is caused by the introduction of the *Bacillus Tetani* into the system through an abrasion or injury. It is a case of soil contamination. The bacilli has been found in the intestines of the horse and other ruminant animals. It is also frequently found in the intestines of man, and especially among ostlers and stablemen. It thrives best in rich, well manured earth, hence, in the older, long settled countries, the danger of wounds becoming infected is much greater. This has been shown to be the case in the present war of the Allies. It being a trench war the wounds become caked with mud and dirt and so infected, the bacilli, obtaining entrance through wounds, travel through the terminals and nerves and thence through the main trunk to the spinal cord and nerve centers, where by the toxins they secrete, produce symptoms so characteristic of this disease. The more prominent symptoms of tetanus, hydrophobia and poisoning by strychnine are so much alike that it is often difficult to diagnose the case unless the clinical history of the patient is known.

In some cases it commences suddenly and with great violence, but it more frequently begins by degrees; commencing with slight stiffness in the back part of the neck, and an uneasy sensation at the root of the tongue, which gradually increases, attended with difficulty of swallowing, oppressive tightness of the chest, and pain under the breast bone extending to the back; the countenance becomes pale; pulse small; urine high colored, and bowels constipated. The lower jaw becomes immovable and tightly clenched, so that at times the slightest particle cannot be inserted between them, hence the name lockjaw arises. In some cases

the spasm is confined to the jaws, but in others they extend with increasing frequency to the arms, legs, and even the entire body, bending it backwards, forwards, or to either side. In the worst cases, the tetanus becomes general, the eyes fixed and immovable, and the countenance distorted with an expression of anguish, the breathing loud and sobbing; the body and limbs fixed, or with frequently occurring spasms, drawn in different directions, until nature becomes exhausted and succumbs at about the fourth day in a continued general spasm. Sometimes, during the remission of spasms, they are renewed by the patient moving speaking, or taking food or drink. The mind remains clear to the last.

**TREATMENT.**—After wounds or injuries, especially laceration or punctures with rough instruments, spikes, nails, etc., in the hands or feet, great care should be taken to subdue the irritation and inflammatory action, and to have the wound heal kindly. First, wash the wound thoroughly with Hydrogen Peroxide, then cauterize with carbolic acid, dress and keep moist with HUMPHREYS' MARVEL WITCH HAZEL. All cases where practicable, Tetanus Anti-toxin serum should be administered.

Should symptoms of lockjaw appear, give at once the **NUMBER Thirty-three** and **No. Thirty-five** in alternation every hour, a dose of two pellets dissolved in water, and continue these without intermission until the spasm has entirely ceased.

When, from the constant clenching of the jaws, it is difficult to administer the medicine in the common method, let the pellets be dissolved in only a few drops of water, and be drawn in with the breath, or even be put in between the lips.

#### NEURALGIA.—(*Nerve-Pain*).

This is a comparatively modern and very common as well as painful affection. As the name indicates, it is simply pain in nerve, and hence it may exist in any part of the

body. It is very common in the face, (prosopalgia), the pain frequently extending from just before the ear, along under and up over the eye, or it may descend along the face and lower jaw of that side to the center of the face; or it may extend to and along the root of the teeth. The pain is violent, sharp or rending, tearing or lancinating, often coming with paroxysms of increase and remission, and often very regularly better or worse at certain periods of the day or night. Sometimes the entire head or side are involved, and the patient can scarcely describe his symptoms. The pain is not increased, but generally diminished by pressure on the affected part, in distinction from pain of an inflammatory or rheumatic character, where pressure increases the pain.

The duration of Neuralgia is very uncertain; an attack may pass off after a few paroxysms, or it may persist for many days or months, with a well-marked, or irregular, intermittent, or remittent character.

*The hair* sometimes undergoes remarkable changes under the influence of Neuralgia. Dr. Anstie noted greyness of hair on the same side in eleven instances out of twenty: in four of these cases there was greyness of part of the eyebrow on the affected side. The same observer has also noted fluctuation of the color, the greyness actually increasing during, and for some time after, an acute paroxysm, the hair subsequently returning more or less to its natural color.

The CAUSES may be *hereditary*, *constitutional*, or *local*. Neuralgia is distinctly *hereditary*, occurring in particular families, and in successive generations. It is well known, also, that such neuralgic families are liable to the more profound derangements of the nervous system—Paralysis, Epilepsy, Hypochondriasis, and even softening of the brain and Insanity—indicating some congenital imperfections in the formation of the nerve-cells and fibres. This seems to



be proved by the fact that, though a precisely similar accident occur to a hundred persons, not more than two or three will experience any Neuralgia; and these will probably be found to belong to a neuralgic family.

*Constitutional causes* are—Impairment of the general health; *depressing influences*, whether mental or physical, as night-watching, sleeplessness, anxiety, insufficient nourishment, or violent exertion; hæmorrhage and consequent debility; affections of the alimentary or urinary organs; exposure to wet and cold—to *strong and cold winds*, which are frequent causes of irritation to the animal nervous system; a gouty, rheumatic, or syphilitic taint; decay or loss of teeth; malaria; and, lastly, organic degeneration at the decline of life, which is the most severe and intractable form presented to the physician. The great majority of patients is found among the hard-working, the poor, and the badly-nourished classes; men suffering less frequently than women. The cause of this, that men are better protected, both naturally and artificially, from the effects of exposure, and that women are tempted to indulge in brief exposures in the open air from warm rooms without any suitable covering to the head, or any protection to the face. The face of man, on the contrary, is covered by a *beard* which shields him from injury by exposure. He also spends less time in the relaxing atmosphere of heated rooms, and enjoys to a greater extent the bracing effects of out-of-door exercise.

*Local causes* may be—wounds; lodgment of a foreign body in the substance of a nerve-trunk; gun-shot wounds, or other injuries; tumors, especially Cancer; minute fragments of bone pressing on the nerve (an occasional cause of facial Neuralgia); carious teeth or stumps. Even Neuralgia from injury is aggravated by any impairment of the constitutional vigour.

**TREATMENT.**—The **NUMBER Eight** will usually be found sufficient, and may be given in portions of six pellets

dry on the tongue, and repeated every one or two hours, according to circumstances.

In cases of chronic neuralgia, the No. **Thirty-five** may be given in alternation with the No. **Eight**, and six pellets of each be given twice per day, making four doses in all.

Sometimes, in very violent attacks, attended with fever, red face, or heat, of the head, the No. **One** may be efficient, dissolved in water, twelve pellets in six spoonfuls and a spoonful given every hour. The use of the above named remedies will usually be found effective, even in the severest cases.

## TOOTHACHE.

*Toothache* is an affection so well known as to require no description. The pain is usually found in connection with decayed teeth, but sometimes also in sound ones. When badly decayed teeth begin to ache, it may be best to have them extracted. Yet, even here, the proper treatment will often entirely allay the pain, and the teeth may do good service for many years afterwards. But when pain affects sound teeth, we should rarely submit to have them taken out, until we have exhausted every means to relieve them without this alternative. A most insane practice it is, whenever we have a toothache, which may be occasioned from a cold and will hence soon pass off, or from a bad state of the stomach, or by fever, or from mental and physical excitement, or from drinking coffee, or pregnancy—all transient conditions—to rush to the doctor or dentist and lose a tooth—a loss which can never be repaired. Under such circumstances, if we will exercise a little patience, a little discretion and judgment, we may allay the pain, remove the exciting cause and save the tooth as well as the suffering of its extraction.

**TREATMENT.**—Take first six pellets of the No. **Eight** and repeat them every hour if needful. If not relieved, dissolve twelve pellets in a glass half full of water; also prepare the No. **One** in the same manner and take them alternately every hour, or every two hours, until relieved. Sometimes the No. **Fifteen** is very efficient, especially in rheumatic subjects, or when the pains appear to have a rheumatic origin, and in other cases the No. **Ten** is equally so.

When the toothache does not seem to yield, and especially in children who are fretful and impatient, relief may be obtained by bathing the face on the affected side freely with HUMPHREYS' MARVEL WITCH HAZEL and holding some of it in the mouth on that side. If the tooth is hollow, wet a little pledget of lint with the same, and press it into the cavity of the tooth. Even better than bathing the face in the same, is wetting a thin cloth or handkerchief with the same, and wrapping it over the affected parts of the face or jaw with a handkerchief.

It is a bad practice in toothache, to hold camphor spirits or other stimulants in the mouth, or to apply creosote, laudanum, oil of cloves, etc., to the teeth. These more frequently irritate than relieve—excite and irritate the entire mouth and gums, and do more harm than good. Let the diet be light if the stomach is deranged; if there is a cold, cure that, and you will soon find relief, and save your teeth. If relieved an hour or so after taking the remedies, take no more; if it returns, try another dose, and even repeat it after one hour or two.

**MEANS OF PRESERVATION.**—The function of the teeth is so important, that their preservation is a matter of the highest moment. The first teeth determine the nature of the second set, and persons suffer lamentably from early neglect. Proximate decay might be prevented, in five cases

out of ten, by simply passing a thread between an infant's teeth, twice a week, from the time of their eruption. Professional inspection should also be sought *before* symptoms of decay present themselves, and while there is still hope that the dentist may fulfill what should be regarded as his mission, that of saving the teeth. Cleanliness, with respect to the teeth, is all-important for infants and children, as well as adults. The teeth should be kept clean by rinsing the mouth with pure cold water, and brushing the teeth with a moderately *soft* brush every morning; and, if possible, after every meal, especially when animal food has been taken; and contact with all disorganising agents avoided. The idea that frequent brushing the teeth is liable to lacerate the gums and separate them from the teeth is erroneous, for it is one of the best methods of restoring them to a healthy condition when they are spongy and liable to bleed. But when a tendency to decay of the teeth or inflammatory action of the gums exists, the use of No. **Eight** and of HUMPHREYS' MARVEL WITCH HAZEL at morning and night, as a wash, will be effectual. The habit of taking very hot substances into the mouth should be avoided, as the expansive power of heat may rupture the enamel, which in turn becomes the nucleus of decay. On the other hand, the habit of subjecting the teeth to the opposite extreme of temperature, as by sucking ice, etc., is also to be avoided. Chewing or smoking tobacco, and the habitual use of strong drinks, tend to destroy the teeth. Lastly, as an important means of preserving the teeth, the general health should be maintained in the highest state of integrity, by the use of plain, nourishing food, cold sponging or bathing, and early and regular habits.

### SWELLED FACE.

Not unfrequently, and often as the sequel of toothache, the face, more especially on one side, becomes swelled or

puffed out sometimes to an extreme degree. The entire tissue of the cheek and sometimes the face, becomes thickened and swelled so as to distort the countenance, and render deglutition or even opening the mouth difficult or painful. The swelling may be red and hot with heat, and some degree of fever or even erysipelas, or it may be pale or hard.

It is not a very dangerous affair, but sufficiently disagreeable and unpleasant to require attention, and more especially so when it assumes the graver forms.

TREATMENT.—If the swelling is red or hot, or both, with some fever, the No. **One** is the remedy, and may be given in doses of two pellets dissolved in water, and repeated every hour. If the swelling is firm or hard, alternate No. **Fifteen** in like manner with No. **One**; or No. **Eight**, if caused by toothache.

In painful swelling of the face, the application of a cloth wet with the MARVEL WITCH HAZEL will relieve both the pain and swelling.

### CROUP.—(*Spasmodic Croup, Child-crowing*).

Is a spasmodic affection of the windpipe, of nervous origin, occurring almost solely in infants and young children, most commonly between the fourth and tenth month. Nervous, hysterical adults sometimes have it.

CAUSES.—*Predisposing*.—It appears to be hereditary in some families; but is mainly found in children who have other characteristics of Rickets. The nervous system shares in the general debility, which is increased in the case of those who live in close, unwholesome air, who are insufficiently nourished, or are fed with unsuitable food, or are brought up by hand, and of those who are delicate and

reared with difficulty. These are always susceptible to the least excitement or depression.

*Exciting.*—The attack is often brought on by the most trifling causes; a draught of cold air, a simple cold, the irritation of a growing tooth, disorder of the stomach, constipation, diarrhoea, derangement of any function, a mere start, a dance, excitement or irritation of any kind.

*SYMPTOMS.*—They come on suddenly, usually in the night. The child cannot inspire, struggles, gasps; presently, the air enters with a *crowing* sound, and, for a time, the child is well. But there may be relapse after an uncertain interval. Or the breath may not return so readily as we have indicated; the larynx may be absolutely closed; for there is no noisy breathing, no “croupy” sound. The child appears to have fainted, is very pale, somewhat blue, not livid, except slightly in the lips; gasps and struggles for breath. Suffocation seems imminent. Presently the spasm ceases, the glottis opens, the air enters with a whistling, cooing, or *crowing* sound; the color returns; and the paroxysm has passed away. Not unfrequently there are Convulsions; and particularly steady muscular contractions of the thumbs, and fingers which are bent towards the palms, and of the toes, which are bent towards the soles of the feet. These contractions are attended with pain; and any attempt to straighten the fingers or toes always causes more pain.

The following table presents the differences between Child-crowing and Croup.

*CHILD-CROWING.*—No warning symptoms; attack sudden; no fever, or cough; breathing is free in the intervals of the spasms; no false membrane; improvement sudden.

*CROUP.*—Premonitory feverishness, hoarseness, and dry cough; attack not so sudden; fever, thirst and ringing cough; breathing more or less rough, and affected during the whole duration of attack; shreds of false membrane are coughed up; improvement gradual.

*TREATMENT.*—Dissolve twelve pellets of **NUMBER One**, in as many spoonfuls of water, and give a spoonful every fifteen minutes, until the child is easier.



**ACCESSORY TREATMENT.**—The child should be promptly raised up as soon as he begins to struggle, and placed in a warm bath; the throat fomented by means of a sponge wrung out of hot water; fresh air admitted to the room by an open window; ether or ammonia may be applied to the nostrils. A dash of cold water in the face or chest sometimes excites respiration. As it is rare for more than one attack to occur in one night, the patient may be laid down again, and comfortably wrapped up, as soon as the fit is over. When teeth are seen to be nearly through, the gums should be lanced; or the mother may rub through the gum with a piece of loaf sugar.

**PREVENTIVE TREATMENT.**—To avert further attacks, and to counteract the constitutional tendency, good hygienic conditions should be secured, and exciting causes, especially such as arise in the digestive organs, should be removed. *Plenty of fresh, pure air* is imperatively required; the danger of catching cold is less than that of Spasm. Cod-liver oil should be given. The constitution must be strengthened by generous diet, adapted to the age of the child. The cold or tepid bath should be in daily use. Excitement should be avoided; quiet fondling is better than romping.

## HYSTERIA.

Is a disturbance of the nervous system characterized by a perversion of the sensations, and generally (though not exclusively) confined to females, between puberty and the change of life.

Formerly Hysteria was thought to be directly due to disorders of the womb; but this is incorrect, for it exists in women in whom all the functions of the womb are healthily performed, and even in women born without a womb; it is also occasionally met with in the *male* sex; men of exalted sensibility, under the influence of some powerful

emotion, coupled perhaps with excessive bodily fatigue, break down under their feelings and play the part of women. We "look to see what organ is diseased, but find none; the machinery is good, but it is working irregularly; it is the engine with the fly-wheel gone."

**SYMPTOMS.**—Hysteria is remarkable for the wide range and indistinctive character of symptoms, and the many diseases it may mimic; especially, loss of voice, stricture of the œsophagus; Laryngitis, a barking cough (more annoying to the hearer than to the patient), Pleurisy, heart disease, difficulty in urinating, Neuralgia, disease of the spine or joints, and many inflammatory diseases. In these cases the patient deceives herself, and by extreme statements of her sufferings often misleads others. In some cases there may co-exist with Hysteria, indigestion, a more or less definite affection of the head, chest, or abdomen, or other condition of impaired health or constitutional delicacy.

*The hysteric Fits.*—The patient screams or makes an incoherent noise, appears to lose all voluntary power and consciousness, and falls to the ground. On closely watching a case, however, it will be noticed that there is not absolute loss of consciousness: the patient contrives to fall so as not to injure herself or dress; an attack does not occur when she is asleep or alone; the countenance is not distorted, as in Epilepsy; the eyelids may quiver and the eyes be turned up, but the eyes are not wide open, nor the pupils dilated, as in Epilepsy, and the patient may be observed to see and to look; the breathing is noisy and irregular, but there is not such absolute arrest of breathing as to cause asphyxia; the fit continues for an indefinite period, followed by great apparent exhaustion, but not by real stupor.

**TREATMENT.**—The predisposition should be overcome by correcting any unhealthy or unusual condition of the menstrual function, if such exist. For an ordinary attack, the  
NUMBER **Three**, six pellets every half hour or hour,

will generally suffice. If connected with scanty menstruation, administer the No. **Eleven** in the same manner. If there are attacks of cramps simulating, or actual convulsions, administer the No. **Thirty-three**, six pellets every hour until relieved.

### HYPOCHONDRIASIS.

Is a functional disorder of the nervous system, attended with exaggerated ideas or depressed feelings, but without actual disorder of the intellect.

**SYMPTOMS.**—The patient imagines himself, without sufficient ground, the subject of some serious disease, and is often haunted with the dread of insanity or of death. Frequently, at first, the patient considers himself dyspeptic from the fact that he is troubled with flatulence, has a furred tongue, foul breath, irregular appetite, and generally obstinate constipation. After a time he complains of a gnawing or burning pain, of uneasiness at the pit of the stomach, or of more serious disease. He has great hope of getting rid of his malady, and strong faith, notwithstanding repeated failures, in treatment. Afterwards, from attention being directed to particular organs, functional disturbances arise,—flushes, palpitation, suppression of bile, or bilious diarrhoea; symptoms which tend to confirm the belief that organic disease exists.

**CAUSES.**—Hereditary influences are potent and common: a taint of insanity, or other grave nervous disease, may be generally traced in near or remote ancestors. The development of the disease is usually in connection with the conditions of middle life, especially indolence and luxury; or, on the other hand, with anxiety and conscious failure in efforts to provide for relations and dependents. Severe shocks of a moral or emotional nature may give rise to the malady. The patient's complaints may, however, be not

merely *fanciful*, but due to actual disease. Organic diseases of the liver or stomach are especially likely to evoke the symptoms of Hypochondriasis, or they may arise, or be excited into new action, by a concurrent morbid process. The statements and symptoms of a hypochondriac should therefore be carefully examined. It is often said that *reading medical books* frightens persons into the disease. This cause must, however, be very limited and trifling compared with the more potent and general operation of such influences as grief, fatigue, the failure of efforts, or the miserable and heart-wearing habits of an *idle life*.

**TREATMENT.**—In general the use of No. **Ten** and No. **Twenty-eight** is the proper course, giving the No. **Ten** each morning and the No. **Twenty-eight** at night. This may be continued for weeks or months, or it may be omitted for a week and then resumed. Should there be *sleeplessness*, No. **Three** may be taken, one or more doses at night, in place of No. **Twenty-eight**, and the use of any other remedies may be invoked for any passing ailment or disease.

**ACCESSORY MEANS.**—The weary mind should be relieved, and vigor of body and cheerfulness of spirits secured by a course of out-of-door exercises, physical training, bathing and suitable dietetic arrangements. Horse-exercise is particularly advantageous. Exercise should be employed in such a manner as may be amusing to the patient, and to the extent of the healthy action of the muscles, but never sufficient to produce severe fatigue. If Indigestion exist, the article on that subject should be consulted. Hypochondriasis from sexual vices requires the aid of a physician.

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## DISEASES OF THE EYES.

The eye, from its importance and delicate nature should claim our most careful attention when it is the subject of disease. We should, at all times, be careful not to apply salves, ointments or irritating washes; but to treat this organ with the utmost caution and tenderness, only applying those substances herein recommended, trusting mainly to the action of the remedies given internally. Nor should we be hasty in intrusting them to the care of incompetent, ignorant, or ill-advised pretenders.

It should be recollected that in all cases of diseased or sore eyes, though the affection seems to be local, yet the whole system is more or less in sympathy with it; and often the local affection is only the expression of a general morbid condition of the system. Thus it is that scrofula, gout, rheumatism, catarrh, or syphilis, may each locate themselves upon the eyes, producing their peculiar forms of inflammation or disease, and hence in the process of cure, those remedies appropriate to these conditions should be employed in connection with those for the local disease.

### SIMPLE OPHTHALMIA—INFLAMMATION OF THE EYE.—(*Conjunctivitis*).

The attack often commences with itching, or a feeling as if sand or dust had got into the eye, the eyeball and inside

or the lid become reddened, and the vessels distributed over the eye infected, carrying red blood. The eyes become irritated, intolerant of light and painful, with flow of hot scalding tears. In some forms, where the inflammation runs high or continues long, ulcers or small specks are apt to form upon the cornea or ball of the eye.

CAUSES.—Exposure of eye to dust, smoke, impure air, cold winds, too bright light, strain of eye, etc.

TREATMENT.—For the first twenty-four or forty-eight hours, give the No. **One** and No. **Eighteen** in alternation, a dose every three hours. Prepare the medicine by dissolving twelve pellets of each in six spoonfuls of water in separate glasses, and administer from the two in alternation. After two days omit the No. **One**, and instead use the No. **Thirty-five** in like manner, in alternation with No. **Eighteen**. As the inflammation subsides and the eye improves, the medicine may be taken less frequently and the medicine may be taken dry, two pellets at a time, instead of in fluid form.

Let the eye be shaded from light if it is oppressive, and avoid reading, writing or taxing the eye in any manner, and live on very light, easily digested food.

For an application, use the HUMPHREYS' MARVEL WITCH HAZEL, diluted with an equal quantity of pure, soft water, and with this bathe the eye; and at night wet a fine linen rag with it and lay over the eye, renewing from time to time as it gets hot or dry. If the same cannot be procured, dissolve six pellets of No. **Eighteen** in half a teacupful of soft water, and use in like manner.

In cases where scrofula or rheumatism are clearly connected with the disease as a cause, it may be advisable, to alternate the remedies for those diseases, No. **Twenty-three** or No. **Fifteen**, with that for Ophthalmia, No. **Eighteen**.



## CHRONIC OPHTHALMIA.

Inflammations of the eyes are often met with of many months, and even years standing. They are sometimes better for a season and then worse again, and generally have their origin in some constitutional taint of the system, such as gout or scrofula, or they may arise from the virus of syphilis or gonorrhœa. The eyeball is generally reddened, blood-vessels injected, lids thickened, red and swelled; intolerance of light, and discharge of thick or purulent matter, or of hot, scalding water, when the irritation has been kindled up afresh. Ulcers, or the remains of old ulcers, are not unfrequently met with.

TREATMENT.—These old cases, which are often met with in bad, unhealthy or neglected subjects, only require care and patience in their treatment. Under good management, wonders can be effected in restoring these organs to sight and usefulness. Give at first, the SPECIFICS No. **Eighteen** and No. **Thirty-Five**, six pellets at a time and four times per day in alternation. Continue this course a week or two weeks, or as long as the eyes continue to improve. If, after a time, the secretion is thick, gummy or abundant, omit the SPECIFIC No. **Thirty-Five** and use the No. **Twenty-Three** instead, and so continue for one or two weeks, returning again to the former medicine to complete the cure.

ACCESSORY MEANS.—Exposure to currents of cold and damp air should be avoided, and if the weather is inclement during an attack, the patient should remain in a room of uniform temperature. A piece of lint, wet with in tepid or cold water, as may be most agreeable to the patient, should be laid over the eye, and covered with oil-silk, on retiring.

If the lids are gummed together in the morning, they should on no account be opened without being first moistened with tepid water or saliva; but any gumming together

may be prevented by smearing the lids at night with a little cold-cream or olive-oil, or by covering them with moist lint and oil-silk, as just recommended. As long as the eyes remain sensitive, they may be protected by plain blue or smoke-colored glasses; they should be used with extreme moderation; crowded rooms, or air poisoned by tobacco-smoke or other impurities, should be avoided. The food should be simple, nourishing, and digestible.

PREVENTIVE MEANS.—Persons predisposed to Ophthalmia should guard against all needless exposures during the prevalence of *easterly* and *north-easterly* winds. In reading, writing, or when using the eyes on fine work, the morning hours should be chosen, when the light is growing brighter. The habits should, therefore, be early and regular; the beneficial influence of out-of-door air should be regularly taken advantage of; and bathing practised.

THE DIET may be more generous than in acute ophthalmia, but still should be free from stimulants of any kind.

### INFLAMMATION OF THE EYELIDS.

Not unfrequently the eyelid becomes inflamed, red, swelled and painful, especially along the margin of the lid, while the eyeball seems but slightly affected. In some cases the frequent recurrence or persistence of this affection, causes the thickening of the margin of the lid, and the permanent loss of the eyelashes.

TREATMENT.—The SPECIFICS No. **Eleven** and No. **Eighteen** are the appropriate medicines, and may be administered two or four times per day according to the urgency of the case, as directed for acute ophthalmia.

### HORDEOLUM.—(*Sty*).

This is a small, hard, generally inflamed tumor, seated on the margin of the lid, commencing as a small, painful lump,

becoming inflamed, swelled, red, and finally softening. In some cases a tumor like a small wen appears in the same locality, and remains without suppurating or discharging.

TREATMENT.—It will be speedily removed by the use of the No. **Eighteen** and No. **Eleven** in alternation. A dose of six pellets may be given every two or three hours at first; then morning and night is sufficient. Small, indolent tumors or wens may require the use of No. **Eighteen** and No. **Thirty-five**, given six pellets night and morning.

### BLOOD-SHOT EYES.

Sometimes from severe or violent coughing, blows, falls, retching, vomiting or crying, the eye or a portion of it becomes suffused with blood, or “bloodshot” as it is termed. It generally passes off itself by being absorbed, when the occasioning cause has ceased to act. A few doses of No. **Thirty-five**, given two or three times per day, will hasten the removal of the extravasation. Frequent bathing with the HUMPHREYS’ MARVEL WITCH HAZEL may also hasten the absorption.

### WATERY, WEEPING EYES.

When this is the result of the closure or obliteration of the tear-duct, medicine will not avail. But when it arises from weakness or over sensibility of the organ, or a partial closure of the duct from inflammatory thickening of the surrounding tissue, or from the secretion itself being thickened, it is quite within the reach of medical treatment.

Administer in such cases the No. **Eighteen**, six pellets three times per day. If a catarrhal condition at the same time exists, interpose an occasional dose of six pellets of No. **Nineteen**.

STRABISMUS.—(*Squinting*).

A condition in which the axis of one eye is not parallel with that of the other; there is loss of harmonious movement of the eyes, and if the unaffected eye be closed, the squinting one looks straight.

The CAUSES are occasionally obscure. Sometimes the disorder arises from an unequal use of the eyes, as from imitating others who squint, looking at spots on the nose or face, or forming the habit of turning the eye inward; sometimes as a consequence of Scarlatina or Measles; from irritation, as of worms, teething, indigestible food; from passion; from disease of the brain; and from general ill-health. When it occurs in the course of any disease of the brain it must be regarded as an unfavorable symptom. Sometimes it is congenital. In aged persons, the condition is due to partial Paralysis of the inner muscle of the eye.

This affection, in its more serious form, can only be reached by a surgical operation. But in some cases of comparatively recent origin in young children, it may be corrected by the use of the SPECIFIC No. **Thirty-Five**, two pellets given morning and night.

## WEAK, OR FAILING SIGHT.

In many cases, the sight fails or becomes obscured or feeble before that period of life when it may naturally be expected. Sometimes, there is a mist or ganze before the eyes, or there are black points, spots or clouds hovering before the sight; or the eyes become dim, watery, or the sight misty on endeavoring to sew, read or use fine print. These conditions indicate weakness of these organs, or a morbid condition of them, and it may be but the reflection of the general condition of the system.

CAUSES.—Excessive use of the eyes on too bright or too

minute objects; too much sleep; the use of tobacco or stimulants; suppressed exhalations from the skin from exposure to cold and wet; suppressed period, etc. These and similar causes may lead to temporary congestion of the brain, and over-stimulate and exhaust the retina, causing dimness or entire suspension of vision, without permanently damaging the nervous structure of the eye. On the other hand, an anæmic condition of the system may diminish the supply of healthy blood to the brain and retina, and produce Amblyopia by exhaustion. Excessive drains on the system, as from flooding in child-bed or at the monthly period, prolonged nursing, sexual excesses, or severe illness. A similar condition may be induced by chronic Dyspepsia from functional or organic disease of the stomach or liver. These affections may cause impairment of vision, through the medium of the sympathetic system, by diminishing the nervous and vascular supplies required for the healthy functions of the eye. Dental causes may be in operation, rendering the extraction of a tooth necessary.

**TREATMENT.**—Take six pellets of the SPECIFIC No. **Thirty-Five** each morning, and the same of No. **Eighteen** every night on retiring. Also, frequently bathe the eyes with cold water, avoid fatiguing or straining the eyes with fine work, reading fine print, or any long continued effort of the eyes, and also the use of glasses, which fatigue or weary the eyes. In all cases, avoid fatiguing or taxing the eyes when the body is weak and enfeebled from sickness.

#### ADDITIONAL SUGGESTIONS ON THE PRESERVATION OF THE SIGHT.

1. **CONDITIONS OF LIGHT FAVORABLE TO THE EYES.**—*Daylight*, owing to its mildness, uniformity, and steadiness. The most perfect artificial light is but an imperfect substitute for the clear light of day; being often too powerful or too

feeble, or flickering or wavering; or the air is often injuriously heated, and deteriorated by the combustion of its oxygen. To enjoy daylight to its fullest extent, involves *early rising*. Morning light is also specially adapted to persons having weakness of vision, as the light is then *increasing*. If necessary that work should be done by artificial light, that kind should be selected which requires least exertion, as writing rather than reading for the student, and sewing lighter and coarser work instead of fine and dark-colored for the seamstress.

2. UNFAVORABLE CONDITIONS FOR EXERTING THE EYES.—The eyes should not be exercised directly after a full meal; when the body is fatigued; late at night, when sleepy; when in a recumbent or stooping posture; when travelling; when dressed in tight clothing—tight cravats, stays, or even tight garters or boots; in badly-ventilated rooms lighted by gas; during recovery from severe or exhausting disease.

Light must not be too strong; a weak light is equally injurious; and if the eyes are used when the light is declining, so that it becomes necessary to hold the book or work nearer in order to see, the sight must inevitably suffer. An unsteady light, as from imperfect gas; or using the eyes when the waves of light are moving about, as under a tree, or when riding, is highly detrimental, as the eyes are severely exercised in continually readjusting themselves; if persisted in, the sight will suffer, and Amblyopia or Amaurosis possibly ensue. The danger to the sight is very great during *convalescence* from prolonged exhausting disease, when patients are apt to read a great deal; to the weakness of vision is then often added that of a bad posture, such as the recumbent, or even artificial light, rendering such a use of the eyes extremely prejudicial. Convalescents should be read to, and the matter should be interesting and amusing. The reading of a novel is more hurtful to the sight than that of a scientific book, because it is read faster, and



the eyes are more severely exercised. A broad page is more fatiguing to the eyes than a narrow one. On the eyes becoming dim after too long exertion they should *rest*, and on no account attempt to persist in reading by increasing the light.

**EYE-SHADE.**—An eye-shade or eye-protector, of brown or slate-colored paper, covered with green or gray silk, and secured by a tape or piece of elastic, answers well for protecting the eyes from gas, etc., indoors; out-of-doors, a wide-brimmed hat answers admirably. An eye-shade should be worn when there is unnatural sensibility to light.

**SPECTACLES.**—Spectacles of plain blue glass are useful for morbid sensibility of the eyes to light, and may be darker or lighter in shade, according to the amount of protection required; or brown or smoke-colored glasses may be used if preferred. The latter cut off the rays of light, and consequently render vision somewhat less distinct, while blue glasses, excluding the orange rays only, interfere less with the clear definition of objects. Green glasses protect the eyes from the red rays; but it is the orange rays which are most intolerable to a sensitive retina. Strong plate-glass spectacles should be worn by persons finding it necessary to protect the eyes against chips and particles of stone or steel (*Angell*).

In all measures adopted for the general protection of the eye, good ventilation and a healthy temperature must not be forgotten.

**EYE-DOUCHE.**—Much benefit often results from a cold douche-bath, a stream of water being directed on the closed eye and adjacent parts. Surgical-instrument makers sell instruments specially adapted for this purpose. Or, water may be thrown by the hand against the closed eyes when holding the face over a basin of water.

**ACCESSORY MEASURES.**—The causes of the disease should be correctly ascertained, and as far as possible, be removed

and guarded against. Patients in crowded and unhealthy towns should remove to the country, at least for a time, where they may take daily out-of-door exercise, and enjoy a pure, bracing air. Frequent careful tepid washing of the eyes to prevent accumulations of matter; a spacious well-ventilated apartment; and avoidance of all causes likely to keep up the inflammatory process, are all necessary precautions. The food should be plain and nourishing, coffee and fermented drinks being excluded; the habits early and regular, and frequent bathing should be practised. A small *wet compress*, covered with oil-silk or india-rubber, worn over the nape of the neck, is a valuable counter-irritant when the more violent inflammatory symptoms have been subdued; it is also useful in obstinate cases.

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# Affections of the Ears and Hearing.

## ECZEMA.

The *cutaneous affections* to which the external ear is liable are, chiefly, Herpes, Erysipelas, Impetigo, Pemphigus, and Eczema. The last is probably the most common, and is generally of the chronic variety. It appears most commonly behind the ears, but also invades the auricle, or external ear, and not unfrequently extends to the meatus, the opening or canal into the ear. When this extension takes place there is some degree of deafness, in addition to the great smarting and itching which characterise the disorder. The general causes and symptoms and treatment, are similar to those of Eczema when it occurs in other parts of the body.

TREATMENT.—Give SPECIFIC No. **Fourteen** each morning and of No. **Twenty-Two** each night for old cases of moderate extent and severity; a dose of three pellets for children or six pellets for adults. In acute or severe cases give the Specifics four times per day.

ACCESSORY TREATMENT.—This consists chiefly in dusting the part with flour or finely-powdered starch, to soothe irritability, and to absorb any fluid that may exude. A warm douche may be used occasionally, when the canal is involved, to allay itching, and to prevent the accumulation of matter within. Great care should always be exercised to *dry* the ears of children, after being washed.

## EARACHE—INFLAMMATION OF THE EAR.

Earache may have a neuralgic or rheumatic origin, or even from a toothache, and is very common in children. It is often brought on from exposure to cold, rough or damp weather. The pain is usually severe, sharp, lancinating or beating, extending deep into the ear, causing great suffering. In very young children it occasions great uneasiness, cries, and rolling of the head. When the ear becomes inflamed, the brain may become implicated from the extension of the disease, and delirium or convulsions with vomiting and cold extremities may be the result. In many instances, when young children have been crying, fretful and peevish for several days, a discharge from the ear first informs the nurse that an inflammation of the ear has been the cause of all the suffering.

TREATMENT.—The principal Specifics are the No. **One** and No. **Twenty-Two**. Give first SPECIFIC No. **One**, two pellets every hour, either dry or dissolved in a spoonful of water, and for simple otalgia or earache it will suffice. If the case is complicated with inflammation, very severe pain or redness of the external ear, or of the passage, as is not unfrequently the case, give SPECIFIC No. **Twenty-Two**, four pellets every hour, either alone or in alternation with No. **One** until the disease has yielded, and for any remaining swelling or discharge give SPECIFIC No. **Twenty-Two**, four pellets four times per day.

In severe cases, a little cotton-wool wet with the MARVEL OF HEALING and placed gently in the ear, affords prompt relief, and may at any time be resorted to.

HARDENED CERUMEN.—(*Ear-wax*).

Cerumen, or ear-wax is composed of oil, stearine, a little coloring matter, scales of epidermis from the lining of the

meatus, and other substances. It contains only about 0·1 per cent of water, and is only very partially soluble. After remaining for some time in the canal, its watery constituent passes off by evaporation, and thus it becomes a hard mass. In advancing age the wax contains a less proportion of water than during the early periods of life, as it becomes drier and more brittle. This wax seems to render the canal pliable, and perhaps also prevents the entrance of insects.

The commonly-alleged cause of hardened ear-wax is a "cold," although frequently there is no evidence whatever that the patient has suffered from any catarrh of the head or throat. In some cases it is due to neglect of cleanliness, or to the use of the twisted end of a towel pushed too far into the canal, or to some similar method of cleansing the ear, which tends to impact the cerumen or to exhaust its watery element. But in the majority of cases the disorder is not simply a local affection, but a sign of some inflammation of the mucous membrane lining the entrance to the ear, or of a diseased state of the glands, consequent on the degenerative changes of old age, lessening the nutrition of parts of the organ of hearing other than the auditory canal.

SYMPTOMS.—*Defective hearing* which has come on suddenly; *tinnitus aurium*, (ringing, or other noise), and other nervous symptoms—vertigo, giddiness, pain in the ear, probably from pressure on the membrana tympana. In aged persons, especially, chronic accumulations may lead to absorption of the bony walls of the meatus.

The deafness, instead of being constant, is intermittent, the hearing is better in the morning, or after eating, or after rubbing the ear with the finger, or after insertion of the finger in the meatus. The deafness may be increased by cold and inflammation.

The disorder may be palliated by removal of the wax. The wax is best removed by a careful use of the syringe,

throwing a small jet of water, at the temperature of full blood heat, along the roof of the cavity. If the water be too hot or too cold it will cause giddiness. If pain ensue, the syringing should be discontinued. In syringing, the ear should be seized with the thumb and finger of the left hand, and pulled gently upward and backward as far as it will go, thus straightening the meatus. If the wax be not removed within a few days, a few drops of warm glycerine, or warm solution of soda, put in the ear at night, will soften the wax and facilitate its removal. To ascertain the progress of removal, the ear should be frequently examined with an ear-speculum. Nothing is so effective a solvent of wax, as simple warm water.

#### FURUNCLE, BOIL.—(*Abscess of the Meatus*).

Is a very common, painful, and somewhat serious disease, to which some persons seem peculiarly liable, and is often associated with boils in other parts of the skin. The frequent recurrence of abscesses causes thickening of the walls of the meatus and of the drum, and, if the tendency to them is not eradicated, some degree of deafness is an invariable result. They are always exquisitely painful, and produce very decided tenderness around the ear. They are liable to recur.

SYMPTOMS.—Acute, throbbing, darting pain in the meatus, great tenderness, tense swelling, temporary partial deafness, consequent on obstruction of the canal.

TREATMENT.—Dissolve twelve pellets of SPECIFIC No. **One** in a half glass of pure water, and the same of SPECIFIC No. **Twenty-Two** in another similar portion of water and give a spoonful every two hours in alternation.

ACCESSORY TREATMENT.—A free use of fomentations and poultices as hot as can be borne, will relieve the acute pain, and hasten the formation of matter. The abscess should be



opened early, as soon as the throbbing indicates the formation of matter, because the tissues are so dense here, that spontaneous rupture is a long and very painful process, and the bone may become carious. A little piece of lint may be moistened with two or three drops of HUMPHREYS' MARVEL WITCH HAZEL, and introduced into the ear. Subsequent cold must be averted by avoiding draughts after fomentation, and by insertion of cotton wool in the ear. The latter is desirable for the absorption of the suppurating matter, but should be frequently changed, lest, by drying, the wool should increase the irritation.

OTORRHŒA.—(*Discharge from the ear*).

Discharges from the ear frequently remain for a time after the acute affection has disappeared. But it is also frequently the result of scarlet fever, measles, or of some scrofulous development. Repeated attacks of earache are quite sure to result in long continued discharges from the ear, with its concomitant results, noises in the head, and hardness of hearing. The discharge is sometimes fetid, offensive, thick, green, cream-like, varying in consistence, quantity and character.

TREATMENT.—The successful treatment of old, long standing otorrhœa, requires some time and patience. It cannot be done at once, but fortunately can be accomplished, and the hearing of the organ generally preserved. The No. **Twenty-two**, four pellets (for children) three times per day, will generally accomplish the desired result. Occasional interposition of a dose of No. **Thirty-five** will be beneficial.

GENERAL MEASURES.—The intractable character of this affection is often, in great measure, due to the neglect of strict cleanliness. The irritating discharge, if allowed to accumulate within the ear, undergoes decomposition, and

gives rise to changes in the deeper structures of the ear. A little cotton wool, frequently changed, may be put into the ear when the discharge is declining, to protect it, out of doors, in cold weather; but even this should be done with great caution, particularly when the discharge smells offensively, for nothing can be more prejudicial than stopping the ear with cotton-wool to prevent its escape. To correct the fœtor of the discharge, which is often very great, HUMPHREYS' MARVEL WITCH HAZEL should be injected, diluted with one-half of warm water. All fluids injected into the ear should be warm.

The *improvement of the general health* of the patient is a point of great importance; for this purpose, change of air, and, in the autumnal months, sea-air, is often attended with most beneficial results. In the absence of sea-air, country-air, in a bracing district, is of great advantage. Cod-liver oil is also strongly recommended.

It is a very common and very foolish idea, which has been fostered in the minds of the laity by ignorant or indolent physicians, that it is dangerous to cure a discharge from the ear. It is doubtful whether a single instance of evil results, under wise treatment, can be cited. Of course irritating lotions too often repeated may set up an acute Otitis based upon the chronic condition, but it very rarely happens; and the idea that the ear in these cases serves as a vent-hole for peccant humors is worthy only the dark ages. The continuance of this disease not only makes the patient a filthy and disgusting nuisance to himself and all around him, but it often greatly endangers life itself.

### DIFFICULT HEARING; NOISES IN THE HEAD.

These two affections may properly be considered in connection. Buzzing, roaring, whizzing, and other noises in the head are often the incipient stage of deafness, and the

noise must of necessity impair the hearing. Noises in the head may result from a cold or some obstruction, or be the consequence of a running or discharge from the ear. Hardness of hearing may result from any of the cases heretofore named, or from dryness of the ear, insufficient secretion of the cerumen or ear-wax, or various morbid conditions of the internal ear. The ear should be examined and any accumulations of wax carefully removed. If the ear or wax is dry or hard, put in, on the point of a small camel's-hair pencil, one drop of pure glycerine, night and morning until the wax is softened, or the dryness removed. Syringing the ears as is often done results in more harm than good. The less water or soap in the ear the better, aside from mere purposes of cleanliness. Recent cases are often cured, while the old and long-standing are not unfrequently obstinate; or, if the bone is involved, intractable.

TREATMENT.—The SPECIFIC No. **Twenty-Two** is in general the remedy, and may be administered either for noises in the head or hardness of hearing, six pellets night and morning for adults. If after eight or ten days there is no decided improvement, use the SPECIFIC No. **Thirty-Five**, in like manner for eight days, and again return to the first prescription, and so continue for weeks, or months if necessary, using one medicine *for eight days at a time* and then resorting to the other.

## GENERAL HINTS ON AFFECTIONS OF THE EAR.

1. *Wet or damp ears.*—A frequent cause of disease of the ear is the practice of leaving the head and ears of children imperfectly dry after washing. It is the more necessary to guard against this danger if there already exist any discharge from the ear. After bathing, the greatest care should be taken to dry the hair and ears *thoroughly*. As a further precaution, a piece of fine linen or blotting-paper

should be twisted into a coil, and gently introduced into the cavity of the ear, to absorb any remaining moisture.

2. *Boxing the ears.*—Parents, governesses, and others who have the care of children, should be aware of an accident very liable to occur from blows on the head or boxing the ears, namely, rupture of the *membrana tympani*, a membrane which closes the bottom of the meatus, and is stretched something like the parchment of a drum. The accident may be recognised by a sense of shock in the ear, deafness, and a slight discharge of blood from the orifice; and if examined by an ear speculum, the rent may be seen. There should be complete rest for several days, and a weak Arnica lotion used.

3. *Deafness not stupidity.*—Another point of considerable importance is the case in which a child, from being slightly deaf, has been thought to be stupid or obstinate. "Very sad is it to think how often a child is thus punished for his misfortune, and, it may be, irremediable injuries inflicted on the mind or temper of this poor victim of unintentional injustice. It is hardly necessary to insist upon the care which is requisite in examining the state of the hearing-power in a child, or to refer to the fact that children will often say, and doubtless think, that they hear a watch when they do not."

4. *Wet compress.*—A small wet compress, covered with oil-silk or tissue, worn over the nape of the neck, as recommended for Ophthalmia, is equally applicable in affections of the ear, especially when of an obstinate nature; and if persevered in steadily for some time will frequently relieve chronic ailments.

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## DISEASES OF THE AIR PASSAGES.

### APHONIA.—(*Hoarseness*).

DEFINITION.—Aphonia is a temporary or permanent paralysis of the muscles, which approximate the vocal cords in the production of sounds.

This affection is common, and generally the result of a cold or some irritation at the upper portion of the wind-pipe or larynx. It is sometimes deserving of serious attention, as it may indicate changes in the upper part of the larynx of a very grave character. It is also a symptom in croup, laryngitis, bronchitis and measles. Sometimes the voice is wholly lost, the patient being only able to speak in whispers; at others, it is low, rough, hoarse or piping.

TREATMENT.—When the hoarseness is the result of a cold, bronchitis, or other disease, no special attention need be paid to this particular symptom. It will disappear under the use of the Specifics given for the general disease. When it is idiopathic, or even the most prominent symptom, the SPECIFIC No. **Seven**, six pellets every two or three hours, will soon restore the voice. In cases of chronic hoarseness or loss of voice, give six pellets of SPECIFIC No. **Seven**, four times per day, continuing the same until relief is obtained.

Clergymen, after speaking, or persons who, after singing, find the voice fatigued, hoarse, furzy, or the throat irritated,

will find relief from taking of the SPECIFIC No. **Seven**, six pellets at once, and the portion may be repeated at intervals of three hours, until the unpleasant sensation or hoarseness has disappeared.

### CROUP.

Croup is usually a disease of childhood, nevertheless there are even adults who are sometimes subject to it in a quite serious form. In children it is always a serious and sometimes a suddenly fatal disease, and hence it is important to be acquainted with its earlier symptoms in order to be able to arrest them. Children from fifteen months to five or seven years of age are most subject to it. Often it comes on suddenly at night, after the child has been exposed, or out playing in a damp, cold or rough wind during the day. The child wakes out of sleep with a sudden hoarse, rough, barking cough, often like the barking of an old dog, and sometimes, at first a hoarseness or difficulty in speaking, and a degree of anxiety with difficulty of breathing. In some cases there are frequent returns of this hoarse, rough, croupy cough, with little or no fever, or difficulty of breathing for some hours, or even a day or two; and the child runs about and is even at times playful until the full disease is ushered in. At others, there is high fever, quick pulse, red face, hoarse cough and difficult breathing from the first hour of the attack. As the disease progresses the fever increases, the cough returns in more frequent paroxysms, is more harsh, dry and tight, and the difficulty of breathing increases, (often by paroxysms), becomes wheezing, with rustling of mucus; labored, and in the worst cases as if breathing through fine brazen pipes, and by degrees becomes loud and harsh, and may be heard all over the room or even the house. Towards the last the breathing becomes increasingly difficult, the voice fails, or is only



heard in whispers, the head is thrown backward to facilitate respiration, the larynx rises and falls with every breath, and the child is bathed in perspiration from the suffering and effort. If the child improves, the breathing becomes easier, freer, and the rattling of mucus looser; the cough more loose and moist, and the voice more natural. If worse, the breathing is more difficult, finer-toned and tighter, the cough dryer, and voice failing.

Sudden attacks of croup are usually not so formidable, and sooner yield to proper treatment. But the worst cases of croup (*angina membranacea*) come on more insidiously. The child may be considered only slightly unwell for several days, *with little or no cough*, or a *mild, veiled cough*, but the *speech is changed* and is a *hoarse whispering*, or is *entirely lost*, and in these cases the difficulty of breathing comes on very gradually, and may not be noticed except on careful observation, or when the child is making some effort. Such insidious cases are always dangerous and often fatal, and this symptom of *loss of voice or whispering voice in children* should always demand attention. It generally marks the deposition or formation of the false membrane, and requires only its continued deposition to become fatal.\*

CAUSES.—The *predisposing* cause is explained by the fact that the *trachea* (wind-pipe) is very small in infants, and does not enlarge in the same proportion as other parts of the body till after the third year; after this period, it enlarges rapidly, and the liability to Croup diminishes accordingly. In some families the predisposition is hereditary.

*Exciting* causes are—cold; dark, damp, and unhealthy localities; sudden changes of temperature; wet feet; poor or scanty food, especially the adoption of improper diet when a child is weaned; insufficient clothing, or previous illness

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\* See differences between Croup and Child-crowing, page 266.

Like most diseases of the respiratory organs, Croup is most fatal in the winter and spring. Low and moist districts are its favorite haunts. Towns situated near the banks of rivers have an extra share of it; and it has been noticed to prevail in such places, especially among the children of washerwomen, clearly showing the relationship of cause and effect. It has been observed as often occasioned by children sitting or sleeping in a room newly washed, and as frequently occurring on a Saturday night—the only day in the week it is customary for the lower classes, in some places, to wash their houses.

TREATMENT.—For the hoarse, croupy cough that often precedes the croup, the SPECIFIC No. **Thirteen** will be sufficient, giving two pellets every two or three hours, and keeping the child well housed and protected from the cold, and especially from exposure to rough, damp air. Where an attack comes on with hoarse cough and some difficulty of breathing, dissolve the SPECIFICS No. **One** and No. **Thirteen**, six or eight pellets of each, in as many teaspoonsful of water in separate glasses, and give the child a spoonful alternately every fifteen minutes, first from No. **One**, and next from No. **Thirteen**, and so on in alternation, if the case is urgent, with these two medicines, only prolonging the intervals between the medicines to half an hour or an hour, as the patient improves. After the fever abates and the cough becomes moist or assumes its natural tone, and the breathing is relieved and free perspiration established, SPECIFIC No. **One** may be omitted and the No. **Thirteen** continued until the cure is completed.

ACCESSORY MEASURES.—During the treatment everything should be avoided that would be likely to excite or irritate the patient. A partial or complete warm bath at 98° Fahr., repeated in a few hours if the patient continue very hot; sponges or cloths squeezed out of hot water and applied to the throat; the feet and general surface of the body should

be kept warm, and the air of the apartment raised to about 65° Fahr., and this temperature uniformly maintained by day and night; watery vapor should be thoroughly diffused therein by keeping a kettle of water constantly boiling on the fire, or over the flame of a spirit-lamp, and fixing a tin or paper tube to the spout to convey the vapor near to the patient. In very severe cases, a tent should be formed over the patient's bed, and steam conducted under it by a tube from boiling water.

It is quite useless and pernicious to give castor oil, hive syrup, ipecac, or to rub oil, goose-grease, or similar substances over the chest, as is often done. Simply make the child comfortable, keep it well covered in bed or in the nurse's lap, and in a mildly warm room free from exposure or drafts of air, and give the Specifics as directed, and the vast majority of cases of croup will terminate favorably. Care should also be taken not to expose children to the cold or to let them go out too soon after an attack of croup. They should be kept well housed and protected until entirely recovered, to prevent a relapse.

DIET AND REGIMEN.—During the attack, water is almost the only article admissible, and may be given in small quantities. During recovery, milk-and-water, arrowroot, gruel, etc. In the case of delicate children, or if great weakness suddenly occur during the course of the disease, it may be necessary to support the patient by essence-of-beef and wine-and-water, which should be administered in small quantities, at regular and frequent intervals.

### TUSSIS.—(*Cough*).

Cough is in general only a symptom of some other disease, such as Catarrh, bronchitis, inflammation or congestion of the lungs, or the bronchia, or influenza, whooping-cough, etc.; and the cure of the cough will be effected by

the cure of the disease upon which it depends. But in many cases the cough may be the chief, and perhaps the only indication of diseased action, and hence demand treatment of itself. Often it is the forerunner or first stage of some disease which is thus cured through the indications furnished by the cough. A suspicious cough, especially in persons of delicate health, or weak lungs, should never be permitted to continue from week to week, but should always excite our suspicion and demand the persistent use of the proper measures for its relief.

**TREATMENT.**—In general the SPECIFIC No. **Seven** will be sufficient. Give six pellets, dry or in water, four times per day, avoiding exposure to new irritation, and the desired end will generally soon be reached.

Should the cough, however, be harsh and dry, with some fever or pain in the chest or side, it is better to alternate SPECIFIC No. **One** with the No. **Seven**, giving six pellets every two hours alternately, until the cough is relieved.

*Violent spasmodic coughs*, approaching hooping-coughs, often require the use of SPECIFIC No. **Twenty**, either alone or in alternation with No. **Seven**, given as directed above.

*Old chronic coughs*, of long standing, are often cured by SPECIFIC No. **Seven** and No. **Thirty-Five**, in alternation, given four times per day, preferable before meals and on retiring at night. If the case is urgent, the medicine may be given, a portion every three hours.

**BEVERAGES.**—Gum-water, barley-water, linseed-tea, and other mucilaginous drinks; or, if preferred, small quantities of cold water, at frequent intervals.

**PREVENTIVES.**—Cold bathing or sponging the whole surface of the body every morning; clothing adapted to the varying conditions of the atmosphere; exercise every day in the open air, if possible in the country; familiarity with a free atmosphere affords a security against excessive sensi-

bility to variations of the weather. Morning air is best; damp, confined air, or that of crowded assemblies, should be avoided.

### PERTUSSIS.—(*Hooping-Cough*).

This disease, like scarlet fever and measles, may be communicated from one child to another by means of the breath, expectoration, or even exhalation from the persons affected, and rarely attacks the same individual the second time. It is more severe and dangerous in some seasons than at others, and though under Homeopathic treatment but few hooping cough patients are lost, yet it is often a troublesome disease, and not unfrequently, under bad management, or in severe cases, leaves serious after sufferings in its train. Under Specific treatment, it generally passes off as a mild and not tedious visitation.

It usually commences as a common cold, with cough, some fever, hoarseness, sneezing, or running from the nose, and this catarrhal stage may continue for eight, ten or fourteen days, before the true character of the disease is manifested. But the cough, if carefully noticed, has from the first a more spasmodic or convulsive character than a common cold, and by degrees its true form is developed, namely: *severe shocks of expiration or cough, following each other in rapid succession, succeeded by a deep prolonged inhalation or inspiration, called the "hoop," or "whoop," or "kink."* Each paroxysm consists of a number of sudden, violent, and short expiratory efforts or coughs, which expel so large an amount of air from the lungs that the patient appears on the point of suffocation: these forcible efforts are followed by a deep-drawn inspiration, in which a rush of air through the partially-closed glottis gives rise to the distinctive crowing or hooping noise. This hooping is the signal of the patient's safety, for when suffocation does take



place, it is before the crowing inspiration has been made. During the paroxysms, the face becomes deeply red or black, and swells; the eyes protrude, and are suffused with tears; and the expression and appearance of the sufferer are such as apparently indicate imminent suffocation. The paroxysm terminates by the expectoration or vomiting of a considerable quantity of glairy, ropy mucus, almost immediately after which the child returns to his amusements, and appears quite well. The ropy kind of expectoration which follows the cough enables us to distinguish it from common cough even before the hoop has been heard. The attacks recur three or four times a day, or every three or four hours, or oftener; sometimes blood escapes from the nose, mouth, and even from the ears, during the fits.

DIAGNOSIS.—It should be distinguished from “Spasmodic Croup.” In Hooping-cough the “hoop” follows the cough; in Spasmodic Croup, it precedes it; when present; but cough is not an essential symptom of Laryngismus Stridulus.

CAUSE.—An unknown materies morbi acting in the body, transmitted by the air and by fomites, and spreading by infection. Its infectious power is great, when at the height of its development. A frequent source of infection occur when there has been partial recovery followed by mild relapse, and the disorder is transmitted to others to be developed in its worst form.

Hooping-cough may be complicated with Small-pox, Measles, Bronchitis, Pneumonia, Pericarditis, etc. It is therefore desirable that the chest should be examined occasionally during the disease by a physician, especially in obstinate cases, so that any complications may be early met. Convulsions are liable to occur if teething be in progress at the time. If there exist a predisposition to Consumption, Hooping-cough may hasten its development.

Uncontrolled by treatment, the disease often lasts twelve

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weeks, or even a longer period, while treated by our simple method, one-half or fourth of that period is sufficient.

TREATMENT.—If the disease is prevailing, or children have been exposed to this disease, and you do not wish them to have it, give the No. **Twenty**, two pellets, three times per day, and you will generally prevent its access.

Should the disease have commenced as a common cold, with cough, fever, sneezing, or sore throat, give the No. **One** and No. **Seven** for one or two days, two pellets at a time, every two hours in alternation, and after that omit the No. **Seven**, and instead give the No. **Twenty**, in the same manner; and as soon as the feverish condition has subsided, omit the No. **One** and give only the No. **Twenty**, two pellets four times per day, and so continue during the course of the disease.

If during the course of the disease the cough becomes frequent, tight, dry, and it loses the usual hooping sound, and with some fever, indicating the access of inflammation of the bronchi, or of the substance of the lung, at once return to the No. **One**, and give two pellets every hour in solution until the threatening symptoms have been warded off; and then go on again with No. **Twenty**, either alone or in alternation with No. **One**.

Often by taking the disease at the commencement, you will arrest its progress before its full development, and it will pass off in a week or two as a mere catarrhal cough, having never reached the hooping-cough form.

During the disease, the child should be carefully nursed and fed on light, easily digested diet, with but little or no meat, avoiding cake or rich, heavy food, pies or sweetmeats; but, on the contrary, giving an abundance of mucilaginous drinks, such as gum-water, rice-water, barley-water, Iceland moss, weak chicken or lamb broth, or weak black tea or chocolate.

Vaccination during hooping-cough usually causes the disease to run a very mild course, and if it has been omitted until this period, it may be well to have it then performed.

### ACUTE CATARRH.—(*Influenza—Grippe*).

An attack of acute catarrh is generally manifested by sneezing often repeated, followed by a sensation of irritation, itching or tingling, extending along the nasal passages to the head and throat, and often down along the larynx and bronchi into the lungs. To this there may be added coryza, tearfulness and weeping from the eyes and discharge of mucus from the nose; at first, thin, acrid, irritating and gradually becoming more copious, thick, yellow, and sometimes offensive, as the disease subsides. To this is sometimes added sore throat, cough and irritation of the lungs.

Where many people are attacked during the same period with the above symptoms, which are, however, often widely modified, but always attended with a *degree of debility, prostration* and persistence of symptoms above what is warranted by the local irritation, it is usually denominated Grippe or "Influenza."

TREATMENT.—The SPECIFICS No. **Nineteen** and No. **Seven** are usually all that is required. Should there be considerable fever or heat of the surface, either at once or succeeding a chill, it will be best to commence with SPECIFIC No. **One**, and give of this every hour six pellets dissolved in water until the fever abates. Then give the SPECIFIC No. **Nineteen** every two hours, six pellets alone; or, if there is some cough or bronchial irritation, alternate SPECIFIC No. **Seven** with it at the same intervals until the disease is subdued.

“LA GRIPPE,” OR INFLUENZA OF 1890-91.

The foregoing description of LA GRIPPE hardly does justice to the epidemic of 1890-91. The latter has been the most widely extended as well as the most deadly known in modern times, if not in history. From its first appearance in Russia in the early Winter of 1889-90, it visited in succession all the countries of Northern Europe including the British Isles, and from thence extended over the whole North American Continent, with varying degrees of severity. In the following Winter of 1890-91, it appeared again in all its old haunts and even in a more pernicious form, increasing largely the customary death rate and extending its depressing influence over a very large proportion of the entire population. While no special class were exempt from its attacks, the aged or those of advanced life were its most numerous victims, and among these the mortality from its visitation was truly serious.

The SYMPTOMS and course of the disease vary considerably from previous visitations. While the usual symptoms of choryza or nasal irritation and discharge with cough and sore throat are frequent, there is a much more decided invasion of the vital forces in the form of *pain in the head, back, chest or limbs*, attended with decided languor or sense of general prostration or debility, and evidence of the invasion of the throat, bronchia and lungs soon become apparent. The pain in the head and the consequent cerebral excitement has been in not a few cases such as not merely to prostrate the subject of the attack, but in many instances to produce delirium and even insanity with suicidal intent; and in such cases this cerebral and nervous excitement and aberration seemed the most prominent effect. The pulmonary extension of the morbid influence forms the chief or more

prominent danger, as the complication with bronchitis or broncho-pneumonia becomes the principal focus of the disease. The headache, backache, nasal or pharyngeal discharge, are of comparatively small consequence and soon yield to treatment, while the cough or bronchial irritation are more serious and persistent and so demand more consideration, and the more so if the patient is constitutionally feeble, or of advanced age, or whose vitality is from any cause impaired or feeble. Hence the treatment should from the first, and all along, have this in view.

The No. **Seventy-seven**, is the general remedy. It meets the epidemic condition and all its manifestations. Taken early it cuts it short promptly. Taken during its prevalence it preoccupies the system and prevents its invasion; taken while suffering from it a relief is speedily realized. Six pellets repeated every two hours, or, in extreme cases every hour, is the rule.

For EXTREME FEVER, or any inflammatory action, No. **One** may be taken in alternation with it, a dose every hour.

For violent coughing or pains in the chest or lungs No. **Seven** may be alternated with it in like manner, or No. **Nineteen** for profuse flowing catarrh. But in general no other remedy than No. **Seventy-seven** will be required.

The No. **Seventy-seven** will “break up” an obstinate Cold that “hangs on” and does not yield to treatment; relieves in a few hours.

No. **Twenty-four, Tonic Tablets**, should be taken, two or three tablets before each meal and before retiring.

~~Be~~ Be very moderate in the use of coffee or tobacco, and especially avoid exposure. Keep warm and comfortable, and live upon very light and easily digested diet.

## CHRONIC CATARRH.

Chronic catarrh often may be said to be constitutional. In some families every member is affected with it more or less. From the first years of childhood, there is an excessive secretion from the nose and air passages. The disease is characterized by an excessive flow of mucus, more or less changed, from the lining membrane of the nose and its back passages, the frontal sinus and throat, and sometimes involving the bronchi and lungs. The discharge is varied in color, character and consistence. Often it is yellow, thick, abundant and offensive; or it may be drier, in plugs or crusts, obstructing the passages and only detached occasionally and with difficulty, accompanied with soreness or ulceration. Sometimes the membrane lining the passage is very red and painfully irritated from every inhalation of the air, and the discharge watery, thin and acrid; but the most common form is the profuse discharge of yellow, thick, offensive matter. Generally the sense of smell is impaired and sometimes quite lost, and not unfrequently the sense of hearing and taste are likewise more or less impaired. Though a chronic catarrh may continue many years and be very annoying and offensive, it is rarely fatal, and never terminates in consumption, whatever quacks may say about it. It is generally better in warm, dry weather, and worse in the spring and fall and in variable weather.

TREATMENT:—The **SPECIFIC No. Nineteen** is the proper remedy, and may be given, six pellets at a time and from two to four times per day, according to the urgency of the case. Should there be bronchial irritation, cough or hoarseness, the **SPECIFIC No. Seven** may be used in alternation with **No. Nineteen** to good advantage.

FALL CATARRH.—(*Peach-Catarrh—Hay Asthma*).

This is a peculiar form of catarrh, to which many persons, especially in the better walks of life, are subject, and which has received quite a variety of designations. It comes on at rarely varying periods, generally about the 20th of August, and having made its attack, is almost sure to return every year at about the same day. It continues with varying degrees of intensity until about the first of October or the first cold or frosty day, when it gradually abates. The attack commences with sneezing, commonly violent and repeated, to which there is soon added tearfulness and discharge of thin watery secretion from the nose, sometimes so abundant as to fall in drops, or to soil a dozen or more handkerchiefs in a day. The eyes become watery, the lining membrane of the nose reddened and exceedingly irritated from the dust of traveling, or the pollen of flowers. Gradually the irritation extends along the air passage, involving the bronchia, and paroxysms of asthma set in, worse at night, obliging the patient to sit bolstered up, and rendering a horizontal position for the time impossible. While the difficulty of breathing is so great, the discharge from the eyes and nose and the sneezing abates; but after two or three days the asthma passes off and the eyes and nose have it again. And so the disease wears on with varying degrees of severity from bad to worse, until time and the cooler days afford relief from this most disagreeable and annoying of physical visitations.

Numerous theories have been advanced as to the cause of this annual catarrh. It has been attributed to the down of peaches, the fragrance of roses, the dust of making hay, the pollen of flowers, etc. But whether any or all of these theories are correct, it seems clearly to be connected with an advanced stage, or possibly, an incipient decay of some forms of vegetation; for we find it cured for the time by a



sea voyage, and patients suffering from it who domicile in those locations most removed from such influences are proportionately relieved. Thus, those who go to the Catskill or White Mountain House say they are sensibly benefited and those at the Sea Shore, where scores of fashionable people, who flee from this visitant, are to be found every year, as certainly as the returning swallows, aver that they suffer only about one fourth as much in these localities.

Old school medicine has accomplished little or nothing toward relieving this class of patients, and the Homeopaths have not done much better, patients of the most distinguished physicians of all schools in our large cities, being found in abundance at these places of refuge every year.

TREATMENT.—If the patient can sojourn for the time at any of the localities named, or can take a sea voyage, it is to be advised. The No. **Nineteen** and No. **Twenty-one** had best be taken, six pellets, from one at night and the other in the morning, for some days before the expected attack, to ward it off if possible. When the attack comes on, commence at once with these two numbers and take six pellets every two hours alternately either dry or dissolved in water, and continue this at longer intervals as the disease abates. When the eyes are much affected with redness intolerance of light, and profuse tearfulness, suspend the No. **Nineteen** and take instead No. **Eighteen**, six pellets, every two hours, and so continue them until the irritation of the eyes are relieved.

These three remedies may be used, either alone or in alternation with each other during the course of the disease. You will thus relieve, shorten and wonderfully modify, if you do not entirely arrest this most unpleasant, if not dangerous annual visitation.

ACUTE BRONCHITIS.—(*Common Cold—Bronchial Irritation*).

ACUTE BRONCHITIS is acute Inflammation of the mucous membrane of the bronchi—the air-tubes of the lungs. It may affect either the large or the small bronchi; and the smaller the tubes in which the inflammation exists, the greater the danger. Bronchitis is most common in elderly persons, although it is not infrequent in children.

CHRONIC BRONCHITIS is a somewhat different disease, very common in advanced life. In mild cases there is only habitual cough, shortness of breath, and copious expectoration, and entire absence of Pyrexia. Many cases of winter cough in old persons are examples of chronic Bronchitis. It is often insidious in its approach, although it sometimes succeeds to acute Bronchitis, when that disease has been neglected or badly treated.

These conditions have so many symptoms in common, and so frequently run into and overlap each other, that it is preferable to treat them in connection. Laymen would find it difficult to distinguish one from the other, nor would it be necessary in a practical point of view. A cold generally commences with a sensation of tingling, itching, irritation, or roughness along the lining membrane of the nose, and thence gradually extending backward along the air passage into the bronchi or lungs. There is often sneezing, sometimes repeated, and soon a discharge, at first of thin acrid, and then by degrees thicker, yellowish mucus from the nose, and cough, at first harsh, dry, violent, often accompanied with a sense of roughness or excoriation in the larynx and upper part of the chest, and as the disease progresses, raising of at first thin, and then of thicker, or yellowish sputa. Sometimes the bronchi and chest are but little affected, and the disease expends itself upon the mucus membrane of the throat, nose and eyes, producing

frequent sneezing, redness and irritation of the eyes, and profuse secretion of the acrid mucus from the eyes and nose. When the bronchi are particularly invaded, the cough is dry, harsh, painful and frequent, often inducing headache, together with more or less hoarseness, and sore throat if the upper part of wind-pipe (larynx) is involved. Fever to a greater or more limited extent is almost always present, and the disease presents all grades, from a sharp, well defined, acute bronchitis to a simple catarrhal irritation. As the disease declines, and sometimes from the first, an eruption of pimples or fever blisters appears around the mouth or lips, which are often very annoying.

**TREATMENT.**—When a cold begins with cough, sneezing, pain in the breast, and general feeling as from having taken cold; resort at once to the SPECIFIC No. **Seven**, of which take six pellets dry. and repeat it every two hours.

If the cold commences with more severe symptoms, and some fever and considerable irritation of the lungs or bronchi, commence with SPECIFIC No. **One** and take six pellets every hour at first, and after a few hours continue them in alternation with No. **Seven** at intervals of two hours, and so continue the two remedies until the force of the disease is broken, when the No. **Seven**, will complete the cure.

Should the disease assume more the catarrhal form, affecting the eyes, nose and throat, the SPECIFICS No. **Nineteen** and No. **Seven** are the proper remedies, and should be administered as above.

In all cases of colds, drink freely of cold water, live somewhat abstemiously, avoid coffee, stimulants, over-feeding and exposure and fatigue.

#### ACUTE BRONCHITIS OF CHILDREN.—(*Catarrh of the breast—Lung Fever*).

This disease consists of an acute inflammation of the lining membrane of the air-passages. The inflammation

may be limited to a portion of the bronchi, or involve the entire membrane; and it may be but slight and easily arrested, or it may be from the very first a very serious and dangerous malady. In young children, it is particularly dangerous, forming the so-called "lung fever," and the younger the child the more critical the attack.

In children, of an early age, it is quite frequent, and commences usually with symptoms of an ordinary cold; but soon the breathing becomes quick, oppressed and labored, and from the increased action of the diaphragm, the abdomen becomes prominent; the shoulders and nostrils are in continual motion from the effort of breathing; on applying the ear to the chest, and often at quite a distance from the patient, the *crepitation* and mucus-rattle of the chest is very audible; expectoration coughed into the mouth and then swallowed, temporarily relieves, and occasionally the mucus is thrown from the air-passages by the effort of vomiting; the cough is frequent, short and distressing; the face becomes pale, anxious, and somewhat livid. The disease has its paroxysms and seasons of remission, during which the child appears drowsy, and, unless relieved, the paroxysms recur with increasing severity until death takes place from suffocation. There is no appetite, but considerable thirst, and the symptoms are generally worse at night. Children at the breast find it difficult to nurse, from the oppression of the chest and impeded respiration.

**TREATMENT.**—The SPECIFICS No. **One** and No. **Seven** are the proper remedies, and may be administered in fluid form as follows: If the symptoms are at all urgent, prepare the medicine for children of two years or under, by placing eight pellets of SPECIFIC No. **One** in as many teaspoonsful of water, in one glass, and the same quantity of SPECIFIC No. **Seven** in like quantity of water in another glass, then from these two give a spoonful every hour in alternation. Older children, or adults, may take twice as much at a dose as

the above. In milder cases, a dose of two pellets every two hours may be sufficient, and these may be continued until the disease is arrested.

If in children, who are in far the most danger in this disease, the fever should have been allayed, but the cough and difficulty of breathing, attended with great weakness, remains, then omit the No. **One**, and in place give the No. **Six**, the same dose, in alternation with No. **Seven**, and continue these so long as they are beneficial.

### LARYNGITIS.—(*Inflammation of the Larynx*).

We distinguish two forms of this disease, the one acute and running its course in a comparatively short time; the other chronic, which may continue for months or years. The acute form is characterized by hoarseness, or low, dull voice, or a difficult, whispering voice, wanting in modulation, a sense of soreness or of tightness in the larynx and upper part of the chest; difficult, tight or wheezing inspiration; sensation of constriction in the throat, and inability to breathe freely accompanied with pain, is increased by pressure on the protuberance of the throat, or along the larynx. There is usually a hoarse, muffled cough, sometimes convulsive and dry, or with expectoration of tough adhesive mucus, sensation as if there were a foreign body or lump in the throat. If the inflammation involves the pharynx, there will be difficulty and pain in swallowing. There is more or less fever, and increased redness on looking into the throat. In some cases the fever runs so high, and the hoarseness and difficulty of breathing are so great, as to approximate a case of true croup. But, as the treatment is similar, the fear of confounding the two diseases need occasion no embarrassment.

TREATMENT.—In all serious, acute cases the No.

**One** and **No. Thirteen** should be dissolved in water, twelve pellets of each in six spoonful of water, in separate glasses, and of these give alternately every hour until the fever has abated, when the **SPECIFIC No. Seven** may be substituted for the **No. One**, and the **Nos. Thirteen** and **Seven** may be continued until the disease is arrested.

### CHRONIC LARYNGITIS.

This chronic inflammation of the larynx, in some of its forms, is almost daily met with. It forms the so-called "ministers' sore throat," and presents every grade of severity, from slight hoarseness and irritation, down through all shades of inflammation and ulceration, to the most inveterate forms of laryngeal consumption. The disease often commences with slight hoarseness and irritation of the throat, frequent belching or raising of scanty mucus and slight cough. As the disease progresses, these symptoms increase, and there is also dryness, burning, itching or tickling and tightness, or in some cases a dull, smarting, or an acute pain in the larynx. The voice may be hoarse or whispering, or piping, and only formed with effort. In the earlier stages, the voice is uncertain and often breaks in singing or loud speaking. The cough, at first dry and short, becomes gradually loose, with raising of mucus or purulent expectoration. Gradually, as the disease progresses, ulceration takes place, generally marked by pain in the throat as from a sharp-pointed body, especially when speaking. Should the disease involve the pharynx, there is also difficulty in swallowing, and in the effort the food or drink may be returned through the nostrils. If the ulceration involves the rim of the glottis, the voice is lost and the patient only speaks in whispers. As ulceration progresses, the discharge becomes purulent, bloody and even offensive; portions of lymph, cartilage and even ossific matter are dis-



charged; the cough and difficulty of deglutition increase, often in paroxysms; the general health gives way; hectic fever, night sweats, emaciation, swelling of the limbs, loss of appetite, vomiting with the cough, and diarrhœa, are unfavorable indications, and lead us to look for the worst. There is usually soreness of the larynx on pressure, and from the inhalation of cold air. Coughing, sneezing, speaking, laughing or swallowing frequently bring on a fit of severe suffering.

**TREATMENT.**—In the earlier stages, while there is simply hoarseness and some degree of dryness or irritation in the throat and cough, the SPECIFIC No. **Seven** will be sufficient to control it, and may be given six pellets at a time, and repeated every three or four hours, and so continued from day to day.

Should the hoarseness be more decided, with cough, dryness, heat and irritation of the throat, or if the disease is fairly developed, resort to the SPECIFIC No. **Thirteen**, of which give six pellets, dissolved in water, every three hours, and so continue for two or three days. After that, give the SPECIFICS No. **Seven** and No. **Thirteen** in alternation, every three hours which may be given until the disease is cured.

Should there be decided fever, a dose or two of SPECIFIC No. **One** may by occasionally interposed with advantage.

### PLEURISY.

This disease is of rather frequent occurrence, and is usually one of grave importance. It is an inflammation of the pleura or membrane, covering the lungs on one side, and being reflected upon the walls of the chest upon the other side, thus forms what is termed the pleural-sac. It is a very thin membranous tissue, having a serous surface and quite liable to inflammation and consequent exudation

of serum. The inflammation and pain may be located in any part of the chest, or even affect a considerable portion of it. A well marked pleurisy commences with a decided chill, lasting often some hours, followed by high fever, heat, red face, sharp, quick pulse, and *very severe stitching, stabbing, or lancinating pains*, often confined to one spot in the side, or front of the chest. The pain is sharp, catching, lancinating, arresting or intercepting the breathing, and is greatly aggravated by coughing or even by movement; and the chest is *sensitive to pressure at the place where the pain is located*. The respiration is difficult and anxious, often intercepted by the stitch, but less oppressed than in pneumonia. The cough is short and dry, and greatly increases the stitch or pain in the side. The pulse is quick and hard; tongue inclined to dryness or parched; thirst decided; urine scanty and high-colored; and the patient generally lying on his back. If effusion of serum has occurred in one side of the chest, lying upon the opposite side is very difficult. The effusion is generally absorbed in the process of cure, but, when the absorbent powers of the system have become weakened, and the cure is imperfect, the secretion may be only partially taken up, and adhesion of the pleural surfaces may occur, thus practically uniting the surface of the lung to the walls of the chest, and occasioning more or less inconvenience in after life.

PHYSICAL SIGNS.—On applying the ear, or the stethoscope to the affected part of the chest at an early period, the dry inflamed surfaces may be heard rubbing against each other and producing a friction-sound, this rubbing may also be felt by placing the hand on the corresponding part of the chest; it is probably due to the pleura being preternaturally dry by exhalation, or to its being roughened by effusion of fibrine.

CAUSES.—Exposure to atmospheric vicissitudes, and sudden checking of the perspiration, are the most frequent

causes, especially in persons of unhealthy constitutions; surgical operations and mechanical injuries are frequently exciting causes; thus the rough ends of a fractured rib may set up inflammation of the pleura. It may also be excited by extension of other diseases. The cause of the disease may materially alter the treatment.

TREATMENT.—The SPECIFICS No. **One** and No. **Seven** are the proper remedies, and should be given thus: Dissolve twelve pellets of No. **One** in as many spoonful of water, and of this give a spoonful (large if for an adult, and small if for a child) every half hour, and continue this medicine until the pulse is reduced and softened, the pain is diminished and the surface cooled, and for twenty-four hours, unless the disease has yielded before this period. Then prepare SPECIFIC No. **Seven** in like manner, and administer it in alternation with No. **One**, at intervals at first of one hour, and then of two hours, until the entire disease has succumbed.

In some rare cases, where the fever has been subdued, and some degree of pain in the chest or soreness yet lingers, the use of SPECIFIC No. **Fifteen**, either alone or in alternation with No. **Seven**, may remove it.

ACCESSORY MEASURES.—Either in pleurisy and inflammation of the lungs, or of other large organs, if the attack is decided or well marked, it is advisable to give the patient at once a hot foot-bath in the manner heretofore recommended in this work, so as to induce a determination of blood to the extremities, and excite general perspiration. After the patient has been put to bed, should the pain on breathing, and the oppression of the chest be severe, a hot fomentation, applied directly to the part, will be of great advantage. The best mode of making it is thus: Take common muslin, and cut out and run up a bag—say eight or ten by twelve inches—enough to entirely cover the suffering part. Fill this with meal and

bran, in proportion of one part of meal to two of bran, so that when the filling shall be evenly distributed, the fomentation shall be about a half an inch or more in thickness. Pour, say, half an inch of hot water into a tin pan, and lay the bag in, evenly spread out. It will at once become thoroughly hot and saturated, and may be applied directly to the chest as hot as can be borne, and covered with a flannel to prevent wetting the clothes. It rarely fails to afford prompt and decided relief, and may be repeated from time to time, if necessary, and is far better than blisters or mustard plasters.

Pleurisy, both before and after effusion, is now treated by strapping the affected side firmly with broad pieces of common plaster, placed obliquely to the direction of the ribs, so as to secure rest. Many cases, it is said, have been cured very quickly simply by this means.

Perfect quiet with a semi-recumbent posture should be secured. The diet should be light,—gruel, arrowroot, broth; frequent sips of cold water will allay thirst. In case of effusion into the pleura, the diet should be dry.

#### PLEURODYNIA.—(*False Pleurisy—Stitch in the side*).

This is a rheumatic affection of the intercostal muscles of the chest, and similar to pleurisy, in that it is characterized by a sharp stitch or stinging pain in the chest. It may be distinguished from pleurisy in *not* being preceded by a chill, and being without fever. The pain shifts from place to place. The surface of the chest or side is usually sore, and the pain may be excited by drawing the finger along between the ribs. A few doses of six pellets of SPECIFIC No. **One** or No. **Fifteen** will generally cure it, and they may be repeated every two hours.

PNEUMONIA.—(*Inflammation of the lungs*).

Inflammation of the substance of the lungs may occur alone, or in connection with pleurisy, which is indeed its most common form. If one lung only be involved, it is termed single Pneumonia; if both, double. The latter occurs in about one out of every eight cases; in the single variety two cases out of every three are Pneumonia of the right lung. The portions chiefly involved are the lower posterior and the base of the lung. The disease frequently co-exists with Pleurisy, when, if Pneumonia forms the chief disease, the double affection is called Pleuro-pneumonia. If, however, Pleurisy predominates, it is termed Pneumo-pleuritis. It commences like pleurisy, with a chill, frequent rigors passing over the body for some hours, followed by fever, with great heat of the surface, which is hot and dry; pulse quick, but rarely so quick or bounding as in pleurisy; breathing is quickened, hot, oppressed, anxious, and sometimes interrupted by the pain; tongue dry, sometimes parched; urine high colored and scanty; cough short, distressing, and dry at first, gradually becomes more moist, raising a little adhesive viscid, or tenacious mucus, which is at first semi-transparent, but soon becomes greyish, mixed with blood, rust colored, or even like prune-juice; the speech is interrupted, hesitating, with frequent pause and abdominal respiration. Sometimes the pain is not sharp, only dull, with a sense of oppression or tightness. The face is less red but more lived than in pleurisy; the vessels of the neck become swelled and turgid, and the frequent cough often causes severe headache. The patient lies upon his back, dislikes to talk and desires to be let alone; sometimes is very irritable or careless of his situation.

In persons having a low vitality, purulent infiltration may occur, which consists of diffused suppuration of the lung-tissue. In rare cases, a circumscribed abscess forms, and



on applying the ear to that part of the chest, a gurgling sound may be heard; this condition is usually preceded by rigors; and a hollow or cavernous sound follows when the abscess has been emptied by coughing and expectoration. The occurrence of copious expectoration of whitish or yellowish mucus, general perspiration, a sudden abundant discharge of urine with copious sediment, diarrhoea, or even bleeding of the nose, may be regarded as forming a crisis, encouraging the hope of a favorable termination.

Occasionally, in old or enfeebled constitutions, gangrene of a portion of the lung may occur. This condition is easily recognised by a most intolerable odor of the patient's breath, resembling that proceeding from mortification of external parts. Unless the gangrenous portion is extremely limited, the case is almost certain to terminate fatally.

CAUSES.—Severe or long-continued exertion, or over-fatigue, either alone or combined with cold. Brief exposure to cold, however intense, is rarely sufficient to excite this inflammation; it is rather a *prolonged and deep-reaching* cause of cold that can produce this effect. "Thus," writes Dr. C. J. B. Williams, "if a person gets thoroughly wet, and remains long in wet clothes, or lies out on damp ground; or a sentinel standing or slowly pacing for hours in a cold wind, the chill goes to the heart, as it were, and paralyzes the deep circulation, and Pneumonia is likely to be the result. Boys who get heated at football, or some other violent exercises, throw themselves on the damp grass, or remove clothing to cool themselves, or stand about; the chill operating on the exhausted body causes extreme congestion in the lungs, the circulation of which has been weakened by the previous violent respiratory efforts. The result is Pneumonia, generally asthenic, commonly double, and attended with much prostration."

As the patient improves, the heat of the surface is reduced: the breathing is more free; the skin and tongue



become and remain moist; the sputa becomes more free, less tenacious and lighter colored, and the cough less frequent and painful; and quiet sleep, with general perspiration and free discharge of urine, indicate a crisis and the breaking up of the disease. On the contrary, increased oppression of the chest, dryness of tongue and skin, frequency of the cough and scanty viscid, rusty, expectoration, hiccough and delirium, indicate the progress of the disease. It is, however, generally curable in its earlier stages, under our management.

**TREATMENT.**—Should be commenced with **SPECIFIC No. One**, of which dissolve twelve pellets in six large spoonful of water for adults, of which give a spoonful every hour for the first twenty-four hours; also, give the patient a hot foot-bath, and if the tightness, oppression of the chest or pain is very severe, apply the hot fomentation to the chest, as directed under the treatment of pleurisy. After twenty-four hours give the **SPECIFIC No. Seven**, prepared in the same manner as No. **One**, and give the two medicines in alternation, at intervals of one hour. Continue this until the disease is removed, gradually increasing the intervals between the doses to two or even three hours, as the improvement progresses.

After convalescence, should there remain some tendency to cough, debility and sweating at night, six pellets of **SPECIFIC No. Ten** at night, and of No. **Thirty-Five** each morning, rarely fail to complete the cure.

**ACCESSORY MEANS.**—The patient should be warmly but lightly covered; the temperature of the apartment 60° to 65°. A large, thick linseed-meal poultice, or spongio-piline, to fit the chest in front and back. A continuous poultice is one of the best methods of providing for the local loss of vitality in Pneumonia and similar diseases. Niemeyer says: "In all cases I cover the chest of the patient, and the affected side in particular, with cloths which have been

dipped in cold water and well wrung out. The compresses must be removed every five minutes, unpleasant as this procedure is in all cases, yet even after a few hours the patients assure me they feel a material relief. The pain, dyspnæa, and often the frequency of the pulse, is reduced. Sometimes the temperature goes down an entire degree." The patient must be kept very quiet, have mucilaginous drinks and farinaceous diet, and be treated generally as directed under Enteric Fever, pages 182—192.

### CONGESTION OF THE CHEST.

This condition, determination of blood to the chest, may be supposed to exist where there is a sensation of fulness, heaviness, weight or oppression in the chest. There may be also throbbings, or palpitations of the heart, attended with anxiety, short, sighing, or difficult breathing, and sometimes a short cough. It is most common in young plethoric subjects, or those of consumptive habit. It is sometimes occasioned by over exertion, exposure to heat and cold, use of stimulants, coffee, spices, vinous or alcoholic beverages, or may be caused by suppression of eruptions or accustomed discharges.

TREATMENT.—In general a few doses of SPECIFIC No. **One**, six pellets, taken at intervals of two hours, will promptly relieve it. Should there be frequent recurrence of the attack, or the condition threaten to become chronic, administer the SPECIFICS No. **Thirty-Five** each night on retiring, and the No. **One** each morning. If it has been caused by suppression, or too scanty flow of the menses, give the SPECIFIC No. **Eleven**, and repeat every two hours until relieved. If connected with constipation, hemorrhoids or indigestion, administer the SPECIFIC No. **Ten** in like manner.

## ASTHMA.

This affection of the lungs and air passages is characterized by difficulty of breathing, coming on in paroxysms, attended with a suffocative, or constrictive sensation, cough and expectoration. The paroxysms may come on suddenly, without warning, and more frequently at night, but often they are preceded by a feeling of irritation in the air-passages, or a sense of fulness or oppression at the pit of the stomach. During the attack the respiration is labored, wheezing, or sighing long drawn, accompanied with anxiety, and the shoulders, larynx and chest are moved with the violence of the effort. The patient usually sits or stands, (can rarely recline), with his arms elevated so as to expand the chest; and often requires the doors or windows to be opened to give him air. There is a sense of constriction or tightness in the chest, or as if he was breathing through a sponge; frequent cough, at first short, dry; then, by degrees, becoming more moist; or with frequent profuse expectoration of mucus, even from the first; the face is pale, sometimes livid; eyes anxious and protruded; often cold sweat on the forehead, face and chest; with palpitation of the heart or arteries, and the pulse is irregular, quick or intermittent. These paroxysms last from a few hours to as many days, and recur again in a few days or weeks, leaving the patient comparatively free in the interval. It is common to divide the disease into two varieties,—the dry and moist asthma. In the first the attacks are more sudden, and cough short, dry, with little expectoration, even towards its close; while in the latter, the attack is more gradual and the cough severe, and the expectoration becomes copious, as relief is afforded.

The disease arises from irritation of the nerves of respiration resulting in most cases from deranged digestion; from the intimate nervous connection existing between the

digestive and the respiratory organs; it may also be produced by changes of the atmosphere, or by introduction of some poisonous but subtile material floating in the atmosphere, and brought by inspiration into contact with the respiratory surface, such as the minute particles, or the mere odor, which passes off from powdered ipecacuanha or hay; the vapor of sulphur, sulphurous acid gas, or chlorine. Asthma is often associated with the gouty or rheumatic diathesis. Excessive exertion and mental emotion frequently bring on a paroxysm. After it has once occurred, Asthma is easily reproduced in indigestion, especially after late dinners or suppers. A frequent repetition of the fits leads to a dilated state of the air-passages and air-cells of the lungs (*Emphysema*), dilation of the right cavities of the heart, and the general displacement of that organ which uniformly exists in persons who have long suffered from this disease. The disease may also be hereditary.

**TREATMENT.**—Our success in curing this disease depends upon our ability to remove the morbid condition from whence it arises. In some cases, the Specifics directed will perfectly meet the indication, and so a permanent cure will be effected. In others it may be in its nature incurable, and in these cases we are only able to palliate the disease, or fundamental condition, and to relieve the attacks when they recur.

During the interval, and to prevent a recurrence of the attack, take six pellets of the SPECIFIC No. **Twenty-One** at night, and six of No. **Seven** each morning, unless some particular demand be made for some other medicine, for some other symptom or indication. During the paroxysm, dissolve twelve pellets of SPECIFIC No. **Twenty-One** in six spoonsful of water, and of these give one every hour, and so continue until the paroxysm has abated, gradually prolonging the intervals as the amendment progresses.

If there is palpitation, or violent beating of the heart,

you may give in alternation with No. **Twenty-One**, the SPECIFIC No. **Thirty-Two**. Sometimes very violent paroxysms have been relieved by SPECIFIC No. **Six**, given in like manner. Children require *only* half the above doses.

ACCESSORY MEANS.—During a fit, striking relief may often be obtained by putting the feet and hands into hot water. At the same time, ventilation must not be neglected; the windows should be regularly thrown wide open to renew the air of the apartment.

PREVENTIVE MEASURES.—Persons predisposed to Asthma should strictly avoid all its exciting causes, especially indigestible food and heavy suppers; wet feet, damp clothes, and sudden changes of temperature. The inclination to stooping should be corrected, and the shape and capacity of the chest improved by a systematic course of drilling. The “plan of dietary” sketched in the first portion of this volume should be adhered to; for the slightest disorder of the stomach may occasion an attack. Pastry, highly-seasoned dishes, too great a variety or too great a quantity at one meal, coffee, and heating beverages, should be avoided. “More is to be done for asthmatic patients on the side of the stomach than in any other direction.” In some cases the diet should be weighed, the hours of meals fixed, and rigidly adhered to. An important point is to take the last solid meal at such an hour as shall allow time for its complete digestion before retiring to bed. Although suppers are generally injurious, a cup of bread-and-milk or a small sandwich is acceptable in the evening, and is by no means hurtful to an asthmatic patient desiring food at that time.

The Shower-bath is a valuable and potent agent to fortify the body against Asthma; the sudden application of water strengthens the whole system, and renders the body less sensitive to atmospheric changes. Out-of-door exercise, walking or riding, is also useful; but it should not be taken



within one or two hours after a meal, or to such an extent as to occasion fatigue.

**HÆMOPTYSIS.**—(*Pulmonary Hemorrhage—Bleeding from the Lungs*).

This is always a very grave affection, sometimes very dangerous indeed. Not more so from what it is in itself than from the condition of the pulmonary tissue which it indicates. The bleeding may arise from one of several conditions: Thus, it may arise as a mere exudation from the mucus surface of the lungs, bronchi or throat; or from congestion or engorgement and overfilling of the vessels and substance of the lungs; or it may arise from a rupture of one or more important, or of numerous minute, blood-vessels in the substance of the lungs. Thus, in any case, it points to a morbid and more or less critical condition of the pulmonary organs. The first and second forms mentioned are generally curable, and the cure of the last depends upon our ability to control or cure the general disease. All blood thrown from the mouth is not necessarily from the lungs. Sometimes it comes from the stomach, but in this case it is vomited up—comes up with retching and nausea, in quantities, and is of dark color; while if it comes from the lungs, it comes with coughing or “hehming,” and is lighter colored, or bright red, or frothy,—comes with a hot or boiling sensation, or sense of effervescence in the chest, the patient often knowing just where it comes from, and it is generally attended with great sinking and prostration of strength.

Bleeding from the lungs sometimes comes on as the vicarious effect of a suppression of the menses, or other discharge, and is cured with the restoration of the suppressed function. It occasionally occurs in stout, full-blooded, plethoric individuals, and is of less consequence than when it occurs in spare, meagre, consumptive individuals.



TREATMENT.—When a hemorrhage occurs, it is all important that the patient and all the attendants should be calm and discreet, not rash or hasty. Noise, haste and fright are the most dangerous auxiliaries of the accident, while composure and presence of mind are half the battle.

The patient should be placed as quietly as possible in a half-sitting or reclining position, and be perfectly at rest, without speaking or being spoken to, having his wants anticipated if possible. Supply the patient with cloths or a vessel, so he may discharge the blood from the mouth, without efforts of the body. If a good Homeopathic physician is at hand, let him be sent for.

If you have HUMPHREYS' MARVEL WITCH HAZEL, get it at once, and put a large spoonful into a common drinking glass, half full of water, and of this give a dessert spoonful every five, ten or fifteen minutes, according to the effect, being careful to prolong the intervals to half an hour, one or two hours, in proportion as the bleeding is arrested. It will act very promptly if the blood is a little dark, not bright red. If you have not HUMPHREYS' MARVEL WITCH HAZEL, use a tablespoonful of common salt, with the same quantity of water, and give in the same manner.

If the *blood is more red and frothy*, and especially with young, plethoric individuals, put twenty pellets of the No. **One** in the quantity of water mentioned above, and give a dessert spoonful at the intervals above mentioned, *in alternation* with HUMPHREYS' MARVEL WITCH HAZEL. These remedies will very generally arrest the hemorrhage, yet the patient should, for some days, be exceedingly careful to avoid effort, coughing, exertion, or exposure, to prevent a recurrence of the attack.

PHTHISIS PULMONALIS.—(*Pulmonary Consumption*).

Consumption is a wasting constitutional disease, attended by deposits of the tubercle bacillus, in which the lungs are destroyed by the degeneration of morbid products, or deposits—tubercles, pneumonia, exudation, etc., and consequent ulceration. The term tubercular disease, tuberculosis and phthisis are synonymous. It is one of the most frequent and fatal diseases to which the human family are subject; prevailing in all countries and in all climates, and among all classes, the poor and ill-cared for, as well as the rich. It is, also, less in some countries and climates than others, but none has yet been found which is exempt from it. So of classes and conditions of society. None have been found among whom the disease is a stranger. The most nearly exempt are those families who for years have exclusively used appropriate and properly prepared (potentised) Homeopathic medicines. For I think it demonstrable, that proper Homeopathic medication tends to destroy and eliminate from the system the tuberculous diathesis, which is the foundation of this disease. True, consumption may come from numerous morbid conditions, which, by exhausting or debilitating the system, produce that condition of innervation, or vital prostration, during which only tubercles are deposited; so that these diseases or conditions have been only the stepping stone to the tuberculous deposit and consumption itself.

This disease may approach in several different ways, some of which we will indicate. It is most common among subjects from seventeen to twenty-five years of age. It is perceptibly lessened at thirty-five, and over fifty quite unusual. In the more insidious form, the patient may be noticed to have a little less vigour and energy than usual; to have less of flesh or embonpoint; lips and cheeks a little paler than usual; complains of being out of breath on exercise, or has even a slight tightness on breathing; has a persistently accelerated pulse—ranging from 90—120 or higher;\* has a little dry cough or a hack, as it is called, and may raise a little frothy mucus. These symptoms may go on for months, without attracting particular attention, or pass off altogether, and then recur again. If not arrested, the cough gradually grows more frequent, dry, irritating, troubling the patient, especially at night; the loss of flesh becomes more manifest,\*\* while the appetite may be yet fair, or only capricious; gradually there is some chilliness in the morning hours, and some heat towards evening;\*\*\* the cheeks are more pale,

\* A persistent rapidity of the pulse, ranging from 90 to 120, or higher, is an invariable symptom of active Phthisis. The pulse is especially liable to become quicker towards evening; and, as the disease advances, more rapid and also feebler. It is rarely under 100, and may run up from this to 140, or till it is impossible to be reckoned; and there is no more disastrous symptom.

\*\* Slow and gradual emaciation—"the grain-by-grain decay"—is far more indicative of Phthisis than a rapid or irregular diminution of weight; and emaciation is more marked, and also more dangerous, in individuals who have been previously stout. To detect the continuously progressive emaciation, it is necessary to have patients accurately weighed from time to time. By this means we are also able to judge of the proportion of the weight of a patient to his height, age, breathing, and other functions.

\*\*\* TEMPERATURE.—The value of the thermometer in the diagnosis of Phthisis will be recognised by the fact that during the growth of tubercle in the lungs, or in any organ of the body, the temperature of the patient is raised from 98° Fahr., the normal temperature, to 102° or 103°, or even 104°, the temperature increasing in proportion to the rapidity of tubercular growth. The sign may occasionally be detected

and the fingers more attenuated, and the ends of the nails somewhat hooked;\* by degrees the cough becomes more frequent, expectoration more abundant, white, frothy and streaked with yellow, and may be saltish or sweetish to the taste; chills now become more decided, recurring every day, usually in the morning, with heat, and circumscribed redness of cheeks every afternoon; the bowels, until now confined, become loose, with frequent stools; sweat comes on at night, at first around the neck and chest, greasy or sticky, and gradually over the entire person; the cough, expectoration and emaciation progress more and more; the feet and legs swell; the mind wanders, and death gradually closes the scene.

In very many or most cases consumption comes on as the sequel to other diseases. These being imperfectly cured, leave the system exhausted, and tubercles are deposited, which beginning to soften, produce irritation, cough, pain in the chest or side, quick pulse, hectic fever, emaciation, night sweats, diarrhœa, expectoration of pus, or yellow, heavy, thick, adhesive mucus, and all the usual symptoms attending the advanced stage of the disease. Women, after confinement, not unfrequently run into consumption after this fashion. Yet, on looking back over the history of the case, it will be found that there had existed previously, some cough, pain in the side, or oppression of the chest, emaciation or debility, which was in fact the premonitory stage of the disease, and which was suspended for a time,

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several weeks before reduced weight or other signs indicate the undoubted existence of tubercle and, in the absence of other signs peculiar to the disease, will determine the diagnosis of Consumption from Chlorosis, or from Heart-disease.

\* It is due to the reader to state that this supposed symptom of Phthisis is now believed to be simply one of emaciation, having no value whatever as a sign of tubercles, but occurs more or less in emaciation from any cause.

and only warmed into vigor by the debility occasioned by the new attack of disease.

In some subjects, especially those in early life and of peculiar temperaments, the disease runs so rapid a course, as to have secured the name of "galloping consumption." This is especially so with persons of scrofulous habit, viz: Thin, light skin, fair hair, long teeth, waxen complexion, tall stature, or with thin chest and pointed shoulders, and enlarged glands beneath the cheek or along the sides of the neck. Not unfrequently in such individuals, with few or no premonitions, beyond a slight cough and some degree of debility and weakness, a slight or severe hemorrhage from the lungs occurs, by which the strength of the patient is cut down at once; and in comparatively few days, cough, expectoration and hectic fever set in, and the patient runs along the course of the consumption with rapid strides.

Advanced cases of consumption are easily recognized; the earlier stages; the incipient beginnings are readily overlooked, and, but too frequently, grave mischief has been done before the patient or friends have been aware of danger. But whenever a person has some slight or severe cough, which does not pass off readily, some shortness or tightness of breath, or pain in the chest or side, and above all, if she is feeble, easily fatigued and *emaciated*, or losing flesh, it is better to give ourselves the advantage of the doubt, and at once apply the remedies and means for a cure, rather than wait the farther development of the disease.

CAUSES.—The deposition of the tubercle bacillus in the lung tissue, the antecedent causes that favor the deposition are, pneumonia, irritation from foreign bodies, coal, iron or slate dust, unsanitary and unhealthy surroundings, lack of plenty of fresh air, insufficient nourishment, anything that tends to lower vitality and enfeeble the powers of life. "So long as misery and poverty exist on the one hand, or dissipation and

enervating luxuries on the other, so long will the causes be in operation which induce this terrible disease'' (*Bennett*).

**DURATION.**—The average may be said to be from nine months to two years; but in acute cases, the disease advances rapidly through the entire substance of both lungs, and it may prove fatal in two or three months, or even in as many weeks.

**THE CURABILITY** of consumption is a mooted question, and one upon which popular impression and medical testimony are at variance. But the moderate view of the cure is this: That all cases of incipient or undeveloped consumption are easily curable, by proper remedies and appropriate surroundings. That cases in the second stage have a fair chance of recovery; while in the more advanced cases the recoveries are only rare.

Very little dependence can be placed on any remedy for the cure of Tuberculosis or Consumption of the Lungs. It is at most a question of fresh air, nutrition, and the patient's powers of assimilation. A strict attention to these essentials may do much towards arresting the disease.

**IN THE TREATMENT** of this disease, too much stress cannot be laid upon the diet, habits and surroundings of the patient; as the disease is essentially one of debility, affecting not only his nutrition, but also the revivification of the blood, by the atmospheric air, it is all important, in the process of cure, that these two indications be fully met. Hence the patient should have a diet the most nourishing and easily digested possible, such as cream, milk if it agrees; good bread, not too new; good fresh butter; puddings of Indian wheat, rye, oatmeal or rice; all succulent and ripe fruits in their season, unless they produce diarrhea.



Use meat and meat soups, without spices; in moderation; beef, mutton, poultry, venison, game, small birds. For beverage, cold water, cocoa, black tea, once or twice per day. Alcoholic Stimulants, either wine or spirits, should be used very sparingly, or not at all. Egg Nogg or Milk Punch may be given in cases of great weakness but not in greater quantity than actually needed.

The apartment of the patient should be high, dry, large and airy, and the temperature in winter or rough weather kept as uniform as possible, or at least, free from extremes, and he should have all the out-door air possible. If the patient is sufficiently vigorous, walking and horseback exercises are best; but in general, daily or constant rides in carriage are the preferable modes, and of these, in good weather, the patient can scarcely have too much up to the point of fatigue. Changes of location wheather South or North, inland or seaward, are always beneficial, provided we do not leave home comforts for the vexations and exposures almost necessarily incident to travel.

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# Diseases of the Circulatory System

## ANGINA PECTORIS.—(*Breast-Pang*).

This consists of sudden, severe paroxysms of pain, or spasm, of an enfeebled or diseased heart, with a constricted, burning sensation, and intense anxiety, chiefly occurring in persons past the middle of age. It is also most common among literary men, or those subject to long continued mental effort, anxiety or disquietude. It is not always manifested in the same manner or with the same symptoms. The first attack most commonly comes on during walking, or some severe effort; but afterwards the most trivial exercise, excitement, or mental effort, or even indigestible food, will produce them; and they finally come on suddenly without any assignable cause, and even while in bed and asleep. The pains are, in most instances, severe and sometimes excruciating, at first confined to the chest, but afterwards extending to the shoulders, and sometimes along both the upper extremities. These paroxysms frequently terminate in a few minutes, leaving the patient comparatively free, and return again at uncertain intervals; while in other cases, they last some hours, or indeed, rarely leave the patient free from severe pain. In severe cases, the suffering is extreme; the face pale and haggard, with an expression of extreme anguish; the eyes sunken; nose pointed; surface cold, and even cold clammy sweats; respiration difficult and rapid; palpitation or intermitting pulsation of the

heart; anxiety or feeling of approaching death; the pulse may be quick, strong and irregular, with hot skin and flushed face, but is most frequently slow, feeble, oppressed and remittent. Sometimes the attack passes off, leaving no trace, but commonly soreness about the chest remains for quite a period, and the digestion is more or less impaired. The duration and result of the disease are uncertain, and the pathological conditions upon which it is founded, vary in different cases.

TREATMENT.—For stout, plethoric, full-fed persons, the SPECIFIC No. **One** is most efficient, and should be resorted to at once, and may be given, dissolved in a spoonful of water, in doses of six pellets, repeated every half hour, or even every ten minutes, if the suffering is severe. Should the patient not be relieved after an hour, give the SPECIFIC No. **Thirty-Two** in the same manner, and repeat at intervals of half an hour until relief is afforded. For any remaining suffering, give the two SPECIFICS No. **One** and No. **Thirty-Two**, in alternation, at intervals of one, two or three hours, according to the urgency of the case.

To prevent a repetition of the attack, give the SPECIFIC No. **Thirty-Two**, six pellets at a dose, morning and night, either dry on the tongue or dissolved in water, as may be most convenient.

CARDITIS—ENDOCARDITIS—PERICARDITIS.—(*Inflammation of the substance of the heart; inflammation of the lining membrane of the heart; and inflammation of the investing membrane of the heart*).

The non-professional reader would be unable to distinguish the differences between these three forms of disease, and would find it impossible to base a treatment upon them. He can at best only expect to ascertain that some portion of the heart is the subject of disease, and to apply general

remedies adapted for its cure in the absence of competent medical aid. In some cases the symptoms are, at least for a time, masked and insidious, and in others more decided and marked; but in general we may conclude that some form of inflammatory disease of the heart exists, from the presence of the following symptoms:—

Sharp, burning, prickling or darting pains in the region of the heart, attended with fever, and shooting to the left shoulder and shoulder blade; frequently along the arm. They are aggravated by deep inspiration, and are increased by pressure on the spaces between the ribs in the region of the heart. The patient cannot lie on the left side, but finds the position easiest on the back; breathing is rapid, irregular and laborious, especially on movement; a feeling of contraction, restlessness, anxiety and frequent faintness. The pulse is accelerated; at times hard, full and vibratory; then again, feeble, irregular or intermittent; while if the ear is applied to the region of the heart, its action will be found to be tremulous and violent; sometimes again it is found to be muffled, veiled and indistinct, indicating an effusion of lymph within the pericardium or investing membrane of the heart. Sometimes the sounds seem double, prolonged, rough, or even blowing or grating, from defective action of the valves. In all cases, the impulse of the heart against the walls of the chest will be found more violent than in health. If extensive effusion has taken place around the heart, the extremities will generally become cedematous or enlarged.

TREATMENT,—So far as it can be conducted without competent professional aid, consists in the SPECIFICS No. **One** and No. **Thirty-Two**. They should be given alternately, dissolved in water, twelve pellets in six large spoonful, of which give a spoonful, at intervals of from one to three hours, according to the urgency of the symptoms. After the more immediate attack has passed, the SPECIFIC No.

**Thirty-Two** should be continued for some time, repeated four times per day, to remove and correct any remaining morbid action.

In case of effusion within the pericardium, indicated by œdema of the extremities or predominant suffocative sensation, the SPECIFIC No. **Twenty-Five** may be given with advantage, repeated every two hours, six pellets in water.

### PALPITATION, AND IRREGULARITY OF THE ACTION OF THE HEART.

In health, we are scarcely sensible of the heart's beat; the perfection of action, therefore, is indicated by entire unconsciousness that such action exists at all. When, however, the pulsations of the heart become much increased in force or frequency, or both, the unpleasant sensation known as "Palpitation" is experienced. *Palpitation* is evidence of a want of balance between the blood to be driven and the power of the heart to drive it. It is not, then, evidence of excessive power, but that the muscular power has been taxed and found unequal to the demand. "It is *laboriousness*, not excessive power, that is indicated by Palpitation" (*Fothergill*).

We infer Palpitation to be caused by functional disorder, (as of Indigestion) when it occurs only occasionally, and when the action of the heart is uniform during the intervals. It is often observed, that patients with serious organic disease of the heart rarely suspect anything radically wrong until the disease has made considerable advances; while patients with mere functional disorder of that organ frequently entertain the gravest apprehension. Most cases of Palpitation are from functional disorder and not from structural disease, and are consequently quite curable.

CAUSES.—*Predisposing*.—A nervous temperament; Hysteria; a full habit; and disease of the heart. *Exciting*.—

Excessive joy, grief, fear, and other mental emotions; severe or prolonged exertions; profuse discharges; menstrual derangements; a disordered—especially an overloaded—stomach; flatulence, etc. Whenever the heart is acting under disadvantageous circumstances, Palpitation is never long absent. Thus any cause, (such as too full a meal; or pregnancy, during the later months) which, by pressure on the diaphragm, diminishes the space for the heart and impedes its beat, places the heart at a disadvantage, and Palpitation takes the place of the normal quiet contraction. The excessive use of tea is one of the common causes of irregularities of the heart's action in weak or nervous women; in some persons Palpitation follows tobacco-smoking, as it may also result from the administration of other deleterious agents. In such cases, of course, a cure can only be expected after the discontinuance of the noxious substance. There are also other cases in which it depends upon organic changes in the structure of the heart itself, its valvular apparatus, or the large vessels immediately connected with it, and where the use of medicine can have but a subordinate effect in relieving it.

#### TABLE OF THE CHIEF DIFFERENCES BETWEEN ORGANIC AND FUNCTIONAL DISEASES OF THE HEART.

**ORGANIC.**—Palpitation usually comes on slowly and insidiously; though more marked at one time than another, is *constant*; elicits *increased extent* and degree of *dulness* in the region of the heart; *Lividity* of the lips and cheeks, congested countenance, and dropsy of the lower extremities, are often present. The action of the heart is *not* necessarily *quickened*. Palpitation often *not much complained of* by the patient, but occasionally attended with *severe pain extending to the left shoulder and arm* (see “Angina Pectoris”); is *increased by exercise, stimulants, and tonics*, but relieved by rest. Is more common in the *male* than the female.

**FUNCTIONAL.**—Palpitation generally sets in *suddenly*; is *not constant*, having perfect intermissions, dulness in the region of the heart is *not extended* beyond the natural limits; *no lividity* of the lip and cheeks, countenance often chlorotic, and, except in extreme cases, there is no dropsy. The action of the heart is generally *quickened*. Palpitation *much complained of* by the patient, often with *pain in the left side*; is *increased by sedentary occupations*, but *relieved by moderate exercise*. Is more common in the *female* than the male.



**TREATMENT.**—In general, a dose of six pellets of **SPECIFIC No. One**, repeated every hour, if need be, speedily removes it. Should the **No. One** fail, the **SPECIFIC No. Thirty-Two** may be resorted to in like manner, and will rarely fail to afford relief. Should the palpitation arise from indigestion, that complaint being relieved by **SPECIFIC No. Ten**, the palpitation or irregular action of the heart will cease, or may be speedily controlled by the **No. Thirty-Two**. When it arises in connection with scanty, delayed or interrupted menses, the **SPECIFIC No. Eleven**, six pellets, four times per day, will relieve.

**ACCESSORY MEASTRES.**—The patient must avoid mental excitement, stimulants, coffee, sleeping-draughts, indigestible food, etc. Pure air; cola water, used internally and externally; regular, moderate exercise in the open air, short of inducing fatigue; a contented and tranquil disposition, with light and nourishing diet, are excellent auxiliaries in the treatment of this affection.

### CHRONIC DISEASE OF THE HEART.

There are various organic (or structural) alterations of the heart or some portions of it, or of its complicated apparatus, (such as enlargements in various directions, thickening or thinning of its walls, defects of its valvular structure, aneurism or dilatation of its larger vessels, etc.), all of which give rise to various symptoms and inconveniences, and are more or less critical, according to the nature of the case. With some of these cardiac changes, the patient lives on for years and with ease, and scarcely suffers more than inconvenience; while others have a constant sense of oppression, shortness of breath at exercise, mounting stairs or mental emotion, constant palpitation or labored action of the heart, difficulty in lying with the head low; and, not unfrequently, pain in the region of the heart or chest, or along the left arm.

It would be impracticable here to describe these various cases and the treatment appropriate to each, and such had best be submitted to competent medical examination. But in the absence of a good Homeopathic physician, the patient may take with great relief and often with permanent advantage, the No. **Thirty-two**, six pellets at a time, and may repeat them two, three or more times per day, according to the urgency of the case.

### VARICOSE VEINS.

Frequently, the veins, especially of the lower extremities, become enlarged, knotted, dark-blue, or purple, sometimes the size of the finger or larger, and are termed *varicose veins*. They are very apt to occur in women during pregnancy, and in men of hemorrhoidal or venous habit of body, and especially in those who are obliged to stand much. The varicose veins are generally painless, but sometimes are attended with burning, shooting or stinging pains, and at times terminate in indolent, obstinate ulcers. Occasionally they occasion general dropsical swelling of the limbs..

TREATMENT.—If the varices are not specially troublesome, bathing them at night with HUMPHREYS' MARVEL WITCH HAZEL will allay any pain or irritation, and the No. **Thirty-two**, six pellets, may be taken morning and night.

For their radical cure and removal, an *elastic stocking* should be worn from the arch of the foot well up over the enlarged veins, and each morning and night the part should be bathed in HUMPHREYS' MARVEL WITCH HAZEL; or, yet better, a cloth wet with the same and laid on over the enlarged veins, and the stocking turned over that, and so worn, while the medicine above directed may be taken internally. This course will promptly relieve and ultimately restore even the most formidable cases.

# Diseases of the Alimentary Track.

## SORE THROAT.

Simple soreness, or swelling of the throat, uncomplicated by ulceration, or quinsy.

CAUSE.—Catarrh; the sore throat being a simple extension of the catarrhal affection. This disease should not be neglected, as it is apt, in some persons, to degenerate into more troublesome forms.

TREATMENT.—See Tonsillitis.

## TONSILLITIS.—(*Quinsy*).

This disease is an acute inflammation of the tonsil or tonsils and adjoining mucous membrane of the throat, and quite common, some persons being subject to it from the slightest provocation or exposure. It usually commences with a feeling of tightness or constriction, or a sensation of a lump or plug in the throat, and some soreness, particularly in the act of swallowing; as the disease progresses, swallowing becomes more painful and difficult; the root of the tongue, the tonsils; the curtains of the palate, and adjoining soft parts, become swelled, red and painful. There is considerable thirst, fever, pulse quick and strong; the tongue becomes coated and breath offensive; heat of surface, red cheeks; eyes sometimes inflamed; headache, and even delirium. Sometimes the throat is so swelled that swallowing becomes almost impossible, the fluid returning

through the nose, and the throat, where it can be seen, is the seat of more or less extensive ulceration. In some cases this is superficial, and confined to slight suppuration of the tonsils; in others abscesses are formed in the tonsil, and the discharge, when it occurs, is quite extensive. If taken in time and properly treated, the disease disappears by resolution, otherwise it yields only when the abscess breaks. It more commonly affects only one side or one tonsil, sometimes passing over to the other, and is more serious when both are involved. Though not generally dangerous, it is in some cases, and in particular epidemics, liable to assume a putrid character with typhoid symptoms, and is then a serious malady.

**CHRONIC ENLARGEMENT OF THE TONSILS.**—Repeated attacks of acute Inflammation, or partially-cured attacks, are followed by chronic enlargement and induration, causing difficult swallowing; hoarse voice, noisy and laborious breathing, especially during sleep; affections of the ears, arising from an extension of the disease along the mucous membrane; and extreme liability, from slight causes, to a frequent recurrence of acute inflammation. Excision of these enlarged tonsils, though often practiced, is not to be recommended, unless in very extreme cases where the tonsils have become so large and hard, that the inconvenience or suffering from them will not admit of further delay. But, generally, persistent Homeopathic medication will reduce them.

**CAUSES.**—The *predisposing* are—a rheumatic condition, abuse of mercury, disorders of the digestive organs, and previous attacks of Quinsy. The *exciting* are—atmospheric changes, wet feet, etc. Quinsy is most frequent in plethoric persons, between fourteen and twenty, and is liable to recur for several years, unless preventive means are adopted.

**TREATMENT.**—At the commencement, when there is con-

siderable heat, fever and pain on swallowing, the SPECIFIC No. **One**, two pellets, should be given every hour, in a spoonful of water, for two or three times, and then the SPECIFIC No. **Thirty-Four** should be prepared in the same manner, twelve pellets in six spoonsful of water, and one spoonful be given every hour from the two medicines, in alternation, and so continued until the disease yields; only as the amendment progresses, the intervals between the doses may be prolonged to two hours, and finally to three or more. When there is simple soreness of the throat and pain on swallowing, without fever, the SPECIFIC No. **Thirty-Four** may be used from the first, and exclusively. In some cases, where the disease may have gone on to suppuration, and the discharge has taken place, and the pain and difficulty of swallowing diminished, only the ulcerative process is slow to heal, the SPECIFICS No. **Twenty-Two** and **Twenty-Three** may be given in alternation, in doses of six pellets, four times per day, until entire restoration.

IN CHRONIC ENLARGEMENT of the tonsils, especially of children, SPECIFIC No. **Thirty-Five**, six pellets each morning, and No. **Thirty-Four** before dinner, supper and on going to bed, will, in reasonable time, remove the difficulty. Sometimes, in old cases, we give No. **Thirty-Five** in the morning, and No. **Twenty-Two**, at night, six pellets at a dose.

ACCESSORY MEANS.—The constant sucking of ice during the commencement of an acute attack, moderates the heat and pain, and checks the secretion of mucus, which gives rise to disagreeable and painful efforts to detach. In severe cases ice may be employed in this manner till the disease has abated. When ice is not procurable, or admissible, the next most effectual local application is the steam of hot water, and equally so whether the object be to bring about resolution or to facilitate the suppurative process. It acts

as a fomentation, and removes the mucus from the crypts and follicles of the tonsils.

In some cases a warm milk-and-water gargle, frequently used, will be found useful and soothing; or, in severe attacks, a hot poultice may be applied across the throat, extending nearly to each ear; in mild attacks the throat-compress may be used. The patient should remain *indoors*, and *in bad cases in bed*. The air of the patient's apartment should be maintained at a temperature of about 65° or 70°, and be kept moist by the evaporation of hot water from shallow dishes near the bed; but proper ventilation should also be preserved.

HUMPHREYS' MARVEL WITCH HAZEL used as a gargle for the throat and as a spray by the means of an atomizer to nasal and air-passages will be found beneficial.

#### RELAXED UVULA.—(*Dropped Palate*).

This is a very common and trifling complaint; yet sufficiently annoying to deserve notice in a work of this kind. It proceeds generally from a relaxation of the tissues of the throat and pharynx, dependant on some digestive irregularity; and is easily remedied by the use of No. **Thirty-four**, three or four times a day, a dose of six pellets.

#### DIPHTHERIA.

Diphtheria is a highly infectious disease occurring chiefly among children and young persons, although adults are by no means free from contracting the disease. It is conveyed from one person to another by personal contact



or by food, clothing, or by any article that may carry the germ from the infected patient. It usually occurs in epidemic form, in a certain locality and rapidly spreads from a given center of infection to the surrounding community. Sporadic cases often occur, yet in every case the germ has been conveyed by some undetected means from some originally infected patient.

The micro-organism or germ producing diphtheria is known as Klebs-Loeffler Bacillus. The bacilli attack the mucous or lining membrane of the throat, mouth, nasal passages, and the vocal chords and in many instances the windpipe and air-passages. Invading these tissues they multiply rapidly.

Diphtheria is characterized by an exudation of lymph on the lining of the mouth, fauces, and upper part of the air-passages, or, occasionally, on an abraded portion of the skin, attended with great general prostration and sometimes remarkable nervous phenomena. Sometimes Diphtheria is a light and easily-managed disease, while at others it is terribly fatal and runs its desolating course, paying but little attention to the best medical means devised for its arrest. Hence, every head of a family should be able to recognize its earlier symptoms and in an emergency to apply the most approved medicines for its cure. But it is one of these diseases which should rarely be entrusted to the care of even intelligent laymen, in an emergency, or in the absence of a competent Homeopathic physician. In all severe cases, as soon as the nature of the disease is known, it should be handed over to the most skillful medical attendant, and his directions followed with fidelity.

Its earlier symptoms are like those of some other diseases, especially simulating mumps or scarlet fever. In the *simple* variety, happily the most common, the symptoms are at first so mild as to excite little complaint beyond slight difficulty of swallowing, or pain in the throat, burning skin, pains in the limbs, etc. The child is at first languid and uneasy, with a pulse quickened but not extremely full, and is restless, without much appetite. These symptoms may continue for some days without any appearance of inflammation of the throat or fauces. *Malignant diphtheria* is ushered in with severe fever, rigors, vomiting, or purging, sudden, great prostration and restlessness, anxious countenance, etc, pointing to some overwhelming disease, under which the system is laboring. The skin is hot, the face flushed, the throat sore, and the mucous membrane bright-red; the tonsils are swollen, and grey or white patches of deposit appear on them, small at first, but gradually enlarging, so that one patch merges into another, forming a false membrane in the throat, rendering swallowing and even breathing difficult. Should the evacuations be examined at this period, the stools will be frequently found covered with mucus, and the urine loaded with albuminous matter; severe periodical pains in the limbs are also present. An examination of the throat, which is in many instances a very difficult matter, owing to the patient's inability to sufficiently open the mouth, will exhibit patches of membranous exudation quite small, often at first not larger than a split pea, *whitish*, or of a *yellowish* or *tawny* hue, deposited mostly in the irregularities of tonsils, or in the arch of the palate or in both, and the tonsils are at times

enormously swollen. Salivation, which may have commenced earlier in the progress of the disease, continues; the pulse is quick and the prostration of the system decided. If, under the influence of the proper remedies, the disease is arrested and convalescence begins, it will be manifested by a sense of ease and quiet, refreshing slumber and free perspiration; diminution of the swollen glands; arrest of the membranous formation, and the gradual disappearance of that already existing; slower pulse and returning appetite.

In some cases, as the disease progresses, there may be no farther increase of the exudation in the throat, but a watery fluid is discharged from the nose; the eye becomes brighter, and countenance anxious; the breathing is labored and rattling, and worse when the patient attempts to sleep; the voice is impaired; the exudation has increased and even reached the roof of the mouth, with increasing prostration. Such cases are very severe, yet some from even this stage have recovered.

As the disease progresses, the difficult, stridulous breathing increases, and a hollow, croupy, metallic, whistling cough shows that the larynx is invaded. The discharge from the nose continues, and fluids taken into the mouth return by the nose. The cheeks have a pale, ashen hue, and there are some mottled or slightly congested spots. Periodical and severe pains occur in the limbs; hemorrhage from the nose and mouth may be very troublesome; and new and large patches of the exudation may be found upon the fauces. The difficulty of respiration increases, the patient grasps at the neck or clothing in the vain attempt to get air; the blueness of the face

and surface increases, and death comes to close the scene. Or in some cases the swelling of the glands subside, the false membrane disappears from sight, and the patient sinks from the effects of constitutional poisoning, and ultimately dies with scarcely a sigh or a groan.

That form of diphtheria in past years commonly known as membranous croup differs from the above mentioned, only as the seat of the disease is situated lower down in the larynx and air-passages, hence giving rise in its earlier stages to somewhat different symptoms. It must be borne in mind that diphtheria and membranous croup is one and the same disease caused by the same micro-organism and should be subject to the same treatment.

Children from fifteen months to five or seven years of age are most subject to it. The child may be considered only slightly unwell for several days, *with little or no cough*, or a *mild, veiled cough*, but the *speech is changed* and is a *hoarse whispering*, or is *entirely lost*, and in these cases the difficulty of breathing comes on very gradually, and may not be noticed except on careful observation, or when the child is making some effort. Such insidious cases are always dangerous and often fatal, and this symptom of *loss of voice or whispering voice in children* should always demand attention. It generally marks the deposition or formation of the false membrane, and requires only its continued deposition to become fatal.

Diphtheria is often found associated with Scarlet Fever. The two diseases often co-exist in the same locality and the susceptibility to one increases the susceptibility to the other, hence we may find a double infection, and the resulting disease will display symptoms characteristic of the two diseases.

It usually commences with shivering, followed by heat; and, from the first, there is decided languor and prostration; some oppression in breathing; nausea, and often, repeated vomiting and sometimes purging; eyes inflamed and watery; cheeks deep red color; tonsils become inflamed, throat bright red color and much swelled; thin acrid discharge from the tonsils and throat, which exco-riates the nose and lips; pulse weak, small and irregular, and scarcely perceptible; tongue white and moist, and swallowing very difficult. This condition soon changes, and ulcerations, varying in size and situation, appear upon the tonsils and surrounding soft parts, which, on inspection, are seen to be swollen and livid. These ulcerations may extend over the curtains of the palate and forward into the posterior portion of the mouth, or back down into the windpipe, and assume a sloughing or decomposed appearance as they increase in magnitude. After some hours, the symptoms of the *false membrane*, like "*wash-leather*," in the throat, soft palate and uvula appear. The prostration of strength becomes more decided; the lips and teeth are covered with sordes or blackish incrustations; the breath becomes very offensive; there is more or less delirium; the countenance becomes sunken and there is some purging. Sometimes the entire neck becomes swelled and livid, and in some very severe cases livid spots or *petechiæ* make their appearance on the surface of the body. Extreme prostration, bleedings from the nose and mouth, and weak, fluttering, intermittent pulse, mark the extreme violence and dangerous character of the disease.

When, about the third or fourth day a gentle perspira-

tion breaks out, and the sloughs are thrown off so as to leave a clean, healthy surface upon the ulcers in the throat, and the countenance brightens up, and the respiration and pulse become more natural, a favorable termination may be anticipated.

The premonitory symptoms of mumps—chilliness, fever, languor and want of appetite—are similar to those of diphtheria, and the swelling of the parotid and neighboring glands of the neck much the same. The characteristic distinction lies in the presence of the false membrane before mentioned in the throat, and the hollow, barking, croupy cough, and difficult stridulous breathing, especially during sleep, and the extreme depression of strength, which mark true diphtheria.

TREATMENT.—This disease formerly the dread of all physicians, and a veritable scourge in our cities and in other localities during its prevalence, has been robbed of its terrors through the introduction about twenty years ago of the antitoxin treatment. First perfected by Behring it has been successfully used throughout the civilized world and has reduced the mortality of from 60% to less than 8%, and in many localities the percentages have been even less. It is essential that the injection of the antitoxin be made as early as possible and should be resorted to in every case, even in suspected cases where the disease has not been fully determined. 4,000 or 5,000 units should be injected in mild cases, and at least 10,000 units in severe cases. All children exposed to the disease, nurses handling the patient, and others brought in contact with the case should receive 1,000 units as a preventive. The false membrane of the throat, mouth and nostrils



should be swabed or cleansed with Hydrogen peroxide—HUMPHREYS' MARVEL WITCH HAZEL will be found most beneficial when used as a spray by means of an atomizer.

From the early stages of the disease give No. **One** and No. **Thirty-four**. Dissolve twelve pellets in six desert spoonfuls of water, each in separate glasses, and administer in alternation every hour two teaspoonfuls. Use HUMPHREYS' MARVEL WITCH HAZEL in cleansing throat and nasal passages as often as practicable.

ACCESSORY TREATMENT.—*Warm Vapor*.—The temperature of the room should be maintained at 68° Fahr., and the atmosphere made moist by the steam from a kettle with a long spout constantly boiling on the fire. Such an atmosphere is easily secured by forming a tent with blankets over the bed, and then bringing a pipe to convey the steam under it.

*Warm baths*,—are valuable accessories. The skin is hot and dry, the urine is often suppressed, the bowels confined, and thus the poison is retained in the system. Warm baths, and the free use of cold water as a beverage, often restore the functions of the skin, the bowels, and the bladder.

*Ice*,—as recommended in Quinsy.

DIET, etc.—From the very commencement of the disease the strength of the patient must be well sustained by nourishment, and he must be urged to swallow it in spite of the pain, which it occasions. Eggs beaten up in milk, or in brandy with water and sugar; beef-tea slightly thickened with rice or pearl-barley; arrowroot or sago, with port or sherry; sudden, extreme prostration requires wine or brandy.

Children who persistently refuse to swallow, must have nutritive injections in bad cases; such as the yolk of an egg beaten up with a tablespoonful of new milk, and two teaspoonfuls of fresh essence of rennet, or an ounce of extract of beef with a scruple of pepsine. Injections (about one ounce at a time) should be commenced, if necessary, immediately after the true character of the disease is recognized, and repeated every two to four hours.

CONVALESCENCE.—Much caution and patience are required during convalescence, as relapses are prone to occur. Nourishing diet, rest, and change of air, are of great utility. Nothing does so much good as a thorough change of air.

All discharges from the patient must be thoroughly disinfected and clothing, bed linen, etc., sterilized.

PHARYNGITIS.—(*Relaxed Throat—Ulcerated Throat—  
Clergyman's Sore Throat*).

These affections are of a similar nature, and require similar treatment.

SYMPTOMS.—The patient first complains of an uneasy sensation in the upper part of the throat, with a frequent disposition to swallow, as if something existed there which could thus be removed. If proper treatment be not adopted, the voice soon undergoes a change; it becomes feeble and hoarse, and sometimes, especially towards the evening, there is complete loss of voice. The patient complains of pain in the larynx, and makes frequent efforts to clear the throat of phlegm by coughing and spitting. On looking

into the throat the parts are found to have an unhealthy appearance, being raw and granular, and the mucous follicles filled with a yellowish substance; a viscid mucopurulent secretion may also be seen adhering to the palate and adjacent parts.

CAUSES.—This condition is probably most often induced by the exercise of the organ of voice when in an inflamed state. An extension of the affection is almost certain to result from exercising the voice during an attack of sore throat or hoarseness, as the muscles of the larynx lose their nutrition through extension of the morbid materials from the inflamed mucous membrane. The disease may also result from an immoderate or irregular exercise of the voice; or, it may follow inflammatory disease of the bronchial tubes or lungs, by much exercise of the voice before recovery has taken place. It is also occasioned by an unnatural style or tone of reading or speaking, as with preachers and military officers.

ACCESSORY AND PREVENTIVE MEANS.—1. *Perfect rest*.—An inflamed larynx, like an inflamed joint, always demands a state of almost complete rest. As a preventive remedy in the case of clergymen, we would strongly urge the general adoption of Monday as a day of out-of-door recreation and cessation from all work, and thus compensate for the great mental and physical expenditure involved in the discharge of the duties of an earnest minister of the gospel on the Sunday.

2. *The throat compress*.—When this is applied, the patient should retire, and he will generally have the satisfaction of finding his throat-difficulty much relieved in the morning. In more obstinate cases, the compress should be worn in the day-time, being frequently re-wet. When discontinued, throat and chest should be bathed with cold water, followed by drying and brisk friction. The beard and moustaches should be permitted to grow, as they afford an excellent

protection to the throat, especially in the case of barristers, clergymen, public singers, and others subjected to the undue or irregular exercise of the organ of voice.

TREATMENT.—Same as for LARYNGITIS, page 305.

### SCURVY OF THE MOUTH.—(*Canker sore mouth*).

This affection manifests itself in various forms, sometimes being quite severe and obstinate, and at others, more inconvenient and painful than dangerous. It occasionally occurs in ill-fed, tuberculous children, from two to six years old, especially in low damp situations. In some cases the gums become hot, red and very sensitive; they swell, become spongy, and shrink from the teeth, leaving them loose, and the gums readily bleeding at the slightest injury; the breath becomes offensive, and sometimes there is discharge of tough, sanious phlegm and saliva; mastication may become difficult from the loose, sensitive teeth, and deglutition painful from the soreness of the throat; the glands of the throat sometimes swell and become painful, and there is often great prostration and a torpid, feverish condition of the system.

In other cases the disease is principally manifested by apthous ulcers appearing upon the gums, the tongue, or the inside of the lips and cheeks, attended with a painful, burning, smarting sensation, and at times free flow of saliva, and a feverish, prostrated condition of the system. This form is very common with nursing mothers, and is often very painful and lingering, apparently arising from an exhausted or debilitated condition of the system and defective nutrition.

TREATMENT.—In general, the SPECIFIC No. **Twenty-Nine** will be sufficient for all forms of sore mouth or apthous ulcerations in the mouth. It may conveniently be given, two pellets at a dose, dissolved in a spoonful of water, and ad-

ministered four times per day, before meals and on retiring at night.

In a prostrated or debilitated condition of the system, the SPECIFIC No. **Twenty-Four** may be given to advantage, in alternation with No. **Twenty-Nine**, at the intervals before directed. Sometimes a weak solution of borax and water may be used to advantage for rinsing the mouth. Sometimes the mouth may be rinsed with a weak solution of brandy and water, with benefit in bad cases with debilitated subjects. Care should be exercised in regard to diet. When the disease exists in a bad form, with extensive inflammation of the mouth or gums, stimulants and animal food, even in soups, should be avoided, and the diet confined to farinaceous or vegetable forms of food. In cases of nursing sore mouth, a glass of ale morning and night may be used with advantage in connection with the Specifics mentioned.

#### ANOREXIA.—(*Want of appetite*).

This may arise from various causes more or less intimately connected with the process of digestion, such as derangement of the stomach, inaction of the liver, results of over-eating, irregularity of meals, eating between meals, late hours and too little out-of-door exercise, indigestion, etc. This morbid condition should be relieved in order that the natural desire for food should be manifested. When it seems to arise from a debilitated condition of the entire system, some stimulants, such as light wine or malt liquors may be taken with advantage. Loss of appetite during acute disease or a weakened state of the system, should be respected; for thrusting food into the stomach in spite of its dictates, will generally give rise to more serious symptoms. Sometimes instead of loss of appetite there is voracious or depraved appetite; these symptoms are usually

associated with Chlorosis, nervous irritation from worms, etc.; they can only be removed by correcting the condition on which they depend. A glass of cold water taken morning and night is often beneficial in promoting an appetite. Aside from these measures, the SPECIFIC No. **Ten**, taken four times per day, six pellets before each meal, and at night, will generally be found efficacious.

GASTRIC DERANGEMENT. — (*Indigestion—Biliousness*).

We distinguish this affection from chronic dyspepsia and from jaundice. It is very common and liable to come on suddenly, from irregularities in diet, over-eating, or partaking of heavy, rich, over-stimulating food, or food unsuited to the existing condition of the digestive organs; excessive use of wines, spirits, or strong malt liquors, or strong tea or coffee; eating too rapidly; irregularities in taking meals; too long fasting between meals; want of exercise; intense mental application; late hours, or from excesses of any kind. When the tone of the stomach has been weakened by purgatives, and in persons of naturally feeble digestion, this condition may be readily provoked by any transient violation of the ordinary regimen.

The symptoms are usually, want of appetite or deficient appetite; coated tongue; flat, insipid, putrid or bitter taste in the mouth; desire for acid, cooling or refreshing things; frontal headache or heaviness of the head; dullness, stupidity or disposition to sleep; constipation, or sluggish, inactive bowels; and sometimes nausea, regurgitation of food, or vomiting of food and bile.

TREATMENT.—In general, little or no food should be taken into the stomach while the nausea and indisposition to food continues; only after these symptoms have passed away, should at first the more light and easily-digested food be given, such as water-gruel, rice-water, boiled rice, toast, or



some nice ripe fruit. As medicine, the SPECIFIC No. **Ten** will be found sufficient, taken six pellets at a time, and repeated every three hours, until the condition has been removed.

Should there be fever, alternate the SPECIFIC No. **One** with No. **Ten**, at the intervals mentioned, and so continue until the febrile symptoms have yielded. Should there be nausea or vomiting, interpose between the portions of No. **Ten**, two or three doses of six pellets each of SPECIFIC No. **Six**, until that symptom has been removed.

### DYSPEPSIA.—(*Indigestion—Weak stomach*).

This is one of our most common diseases, and generally of very obstinate and lingering character. It may arise from various organic changes in the organs of digestion, and so may likewise manifest itself in diversified forms from the most trivial weakness of digestion, down to grave, organic changes in the substance of the stomach itself.

It may be induced or brought about by various causes, among which may be especially mentioned the use of cathartic or anodyne medicines in early life, or the habit of giving such drugs to infants; imperfect mastication of the food, in consequence of too rapid eating—a very common and wide-spread fault; the loss of teeth; the presence of decayed teeth in the mouth and the consequent swallowing of vitiated saliva;—habitual low spirits and desponding state of mind, likewise weakens and impedes digestion; too long fasting, inducing exhaustion of the vital powers, tends to impair the power of digestion; the excessive use of stimulants produces changes in the coats of the stomach which may render digestion difficult and finally impossible; want of exercise, sedentary habits, intense and long-continued mental application may likewise be named among its causes.

It is usually manifested by distress after eating; heaviness or weight in the pit of the stomach, as if a load or a stone lay there; tenderness of the præcordia on pressure; inability to wear tight clothes; frequent headache; dullness and confusion of the head; bloating after eating; sometimes waterbrash, or rising of the food and fluid into the mouth after eating; want of appetite; bad taste; coated tongue; flatulence; constipation or sluggish or torpid bowels, and not unfrequently, piles or hemorrhoids; palpitation of the heart; and nightmare. Such are among the more prominent symptoms by which this affection is manifested, yet they are frequently varied, relieved or intensified by the habits or food and regimen of the patient, or the intensity of the morbid condition.

FLATULENCE, WATERBRASH, HEARTBURN, are merely symptoms of dyspepsia, or of gastric derangement. Yet, they may either of them form the principal feature of the complaint, and almost exclusively occupy the attention of the patient. *Flatulence* (wind) by disturbing the stomach, which thus being made to encroach upon the space occupied by the lungs, heart or other organs, impedes their healthy action, and thus gives rise to disturbances in distant parts. It is caused by defective nerve-force, or general debility; food may be detained in the stomach and undergo fermentation, owing to imperfection or arrest of the vital and chemical processes characteristic of health. At other times flatulence is apparently generated by the mucous membrane of the intestinal canal; for the symptoms are very apt to arise in dyspeptic persons when a meal is delayed beyond the accustomed hour, or when the stomach is empty. Flatulence is often associated with faintness, nausea, palpitation, and other disagreeable sensations. In *waterbrash* there is a frequent rising or regurgitation of acid or tasteless watery fluid, into the mouth, from the stomach. It seems to arise from closure of the œsophagus (food-pipe)

by muscular spasm, so that the trickling saliva is prevented from passing into the stomach, and re-ascends to the mouth without any effect. Sometimes this is accompanied with belching of air coming up with the eructation, and accompanied with loud, unpleasant noise, and not unfrequently a portion of every meal is thus thrown off. There is also a feeling of fullness, distention, and often of pain and distress in the stomach and præcordia.

With *heartburn*, there is a burning or gnawing uneasiness, felt principally in the pit of the stomach, but often extending far around or up into the chest, and down into the abdomen. Sometimes it is attended with anxiety, nausea, coldness of the extremities, debility and fever, faintness, and there are also sour, acrid risings, or regurgitations into the mouth.

*Hiccough* (*singultus*) is a common accompaniment of heartburn, and consists of brief spasms of the œsophagus. In infants it is easily removed by administering a small quantity of milk or water.

*NIGHTMARE* (*Incubus*).—In this condition the patient experiences confused and frightful dreams, with a sense of weight or pressure impeding breathing and producing great anguish; or he fancies himself in imminent danger or difficulty, from which he vainly strives to extricate himself, until at length he succeeds in uttering a cry, or moving, when the distressing condition terminates. It is caused by disorder of the digestive organs, and most frequently follows a late, especially a heavy supper. It may also be induced by fatigue, or an uneasy posture in bed, or in children, by enlarged tonsils; sometimes the cause is very obscure, and requires professional examination and treatment.

As these are but symptoms or phases of dyspepsia or gastric derangement, the same treatment is indicated.

**TREATMENT.**—The course usually pursued by the subjects

of this disease tends much to aggravate and prolong it. Because the bowels are constipated, recourse is had to cathartic or aperient medicines, which afford only momentary relief, while permanently intensifying the disease. Costiveness may be bad, but not half so bad as the effects of drugs given to remove it. Persons subject to this disease should be careful of their diet, and use only such food as experience has taught them agrees with their digestion. A physician can only recommend the articles most likely to suit, and having ascertained from experience what diet or kinds of food are for the time best, the diet should be composed of these articles, and only, by degrees as the digestion is improved, a more liberal bill of fare, or more questionable articles may be allowed. Take plenty of time for meals, eat moderately, and masticate the food well, using only a small quantity of fluid with the meal, and eat not too often, or too much at a time. Each night, on retiring, and in the morning on rising, take also a glass of cold water. Of medicines, the SPECIFIC No. **Ten** will usually be found efficient, and may be taken, six pellets at a time, before each meal, and on retiring to rest at night. Perseverance in this course will rarely fail to cure the most inveterate and stubborn cases. If the bowels remain obstinately costive, an injection of tepid water may be taken every morning so long as it may be necessary. Very soon, under the influence of the medicine and proper food and habits, the bowels will act regularly.

But with females, and delicate subjects, the SPECIFIC No. **Eleven** may be preferable to No. **Ten**, or, the two may be taken in alternation. In obstinate cases of *waterbrash*, brilliant results often follow the free use, when hungry, or thirsty, of *buttermilk*. Fresh milk is not so well borne.

ACCESSORY MEASURES.—The following points in the treatment and prevention of indigestion should, as far as possible, be adopted.

1. *Mastication*.—The reduction of food to a state of minute division in the mouth is a most essential step towards easy and perfect digestion. A stomach, especially a weak stomach, acts tardily and imperfectly upon food, introduced in an incomplete state of comminution. Further, food requires to be well masticated, that it may be duly mixed with saliva. The salivary secretion is intended to moisten and lubricate the food, and is a most essential chemical aid in digestion. The action of the saliva is especially necessary for the digestion of vegetable food; for it is only by means of this fluid that such articles of diet as potatoes, bread, rice, etc., are rendered at all capable of absorption. We therefore warn *the busy, the studious, the solitary, or, on the other hand, those persons who talk too much during meal-time*, of the danger of neglecting the perfect mastication of their food. *The loss of teeth* is a frequent cause of indigestion.

2. *Overloading the stomach*.—Too large a quantity of food interferes with digestion, 1. by so distending the stomach as to interfere with its necessary contractions. 2. By furnishing the stomach with a greater amount of food than can be properly saturated with the saliva supplied. After a long abstinence from food, as in the case of persons who dine late and take too little lunch, there is great danger of eating too much, unless the meal be taken slowly, or finished before the sensations of hunger are completely appeased.

3. *Suitable food*.—See Section on FOOD.

4. *Beverages*.—See Section on BEVERAGES.

5. *Disposition in which to eat*.—A cheerful and tranquil frame of mind, especially during meals, is a most essential point in the treatment and cure of indigestion. Cheerful conversation and ease of mind favor digestion by increasing the secretion of gastric juice. The aliment received under pleasurable circumstances may be expected to furnish



in abundance, and in the highest state of perfection, the secretions necessary for good digestion.

6. *General habits.*—Mental or bodily occupations should not be resumed immediately after a full meal; nor should food be taken without a few minutes' pause after exhaustive fatigue. Violent muscular exertions arrest digestion by engaging the nervous energies in other directions. The weary man, whether weary from the sweat of the brow or the sweat of the brain, *should rest before he eats*; and if the cause of fatigue has been in operation till the time of rest approaches, solid food might then be productive of the most serious results. Under such circumstances, if nourishment be deemed necessary, it should be limited in quantity and of the lightest kind, as a cup of beef-tea, cocoa, or chocolate, or the yolk-of-an-egg well beaten up with milk. We particularly recommend the general plan of dietary sketched in the introductory chapter for general adoption. *Regularity* in the habits of life, such as in taking food, sleep, exercise, etc., is an important condition in the prevention of dyspepsia. Feather beds, and too much sleep, should be avoided; the patient should retire and rise early; bathe or sponge the body every morning with cold water, and take moderate open-air exercise daily. An occasional *change of air* and scenery exercises a wonderful influence in removing or preventing an attack of indigestion, diverting the mind from its ordinary train of thought, business and family anxieties, or gloomy pondering over personal ailments.

#### GASTRALGIA.—(*Pain or spasm of the stomach*).

This is a very painful and distressing affection of the stomach, arising, generally, at somewhat regular periods of a few weeks or months, leaving the system in the interval comparatively free. It consists in spasmodic pains or contractions of the stomach, sometimes slight, but more com-



monly with almost insupportable violence; returning at intervals of a few moments with increasing vigor, after a comparative calm; the pain is most severe in the pit of the stomach, but often extends up into the chest and sides, or into the back, exciting nausea, vomiting and great anguish. Belching up of wind, which sometimes relieves the patient; faintness, coldness of the extremities, and anxiety are generally present. An attack may last from a few hours to one or two days, and it may return in some subjects, at any time, from very slight provocation, or at intervals of a few weeks or months, from slight or no apparent cause.

The disease originates in a morbid condition of the nerves of the stomach, and is often associated with disease of the liver or spleen, or both, or in cancerous or other disorganizations of the stomach or intestines. An attack may be excited by eating indigestible food, fresh bread, chestnuts, sweetmeats, unripe fruit, cherries, figs, cheese, and in some cases, by taking coffee or strong tea. It may likewise, in gouty or rheumatic constitutions, be excited by exposure to cold and wet. In females it is sometimes found in connection with the monthly periods. In many instances the system seems to have acquired a predisposition to this form of disease, and in such subjects it masks or overshadows all other symptoms, and may be produced at any time from very slight indiscretions.

**TREATMENT.**—As precautionary measures, persons subject to this form of disease should be exceedingly careful in regard to their diet, avoiding rich food, gravies, fresh bread, warm cakes, preserves and cheese, or any article of food which experience has shown to disagree, or to occasion these attacks, and also to take as preventives, six pellets of the **No. Ten**, morning and night. When the premonitory symptoms, or a slight gastric derangement threatens to culminate in an attack, recourse should be had at once to the **No. Ten**, one or more doses of

which, at intervals of two or three hours, will suffice to correct the derangement, and thus prevent the attack. During the attack, the SPECIFIC No. **Ten** is the proper remedy, and may be given in doses of six pellets, dissolved in a spoonful of water, and repeated every fifteen, thirty or sixty minutes, according to circumstances, until the pain is relieved. If the suffering is intense, and the pain does not yield to the SPECIFIC No. **Ten**, after an hour or so, it may be best to alternate the No. **One** in the same manner with it, and so continue until the patient is relieved. Hot cloths laid upon the stomach, and a large injection of tepid water, are useful auxiliaries for relief during an attack.

#### HALITOSIS.—(*Offensive Breath*).

This unpleasant affection may be dependant upon other causes than decayed teeth or impurities in the mouth. Not unfrequently it arises from imperfect digestion or other derangement of the system, and in some persons and families, it may be constitutional.

TREATMENT.—Persons subject to this affection cannot be too careful in keeping the teeth clean and free from tartar, and in rinsing the mouth after every meal. With regard to medicines, the SPECIFIC No. **Ten**, six pellets morning and night, will correct it if dependent upon imperfect digestion. If it occurs in females during the monthly period, the SPECIFICS No. **Eleven**, six pellets morning and night, will remove the difficulty. Where it is constitutional or resists these medicines, the third trituration of *Aurum fol*, or of *Baryta carb.* a small powder taken daily, often works an entire cure.

#### COLIC—BILIOUS COLIC.

Most persons are acquainted with what is termed colic, which is the violent constriction (*spasm*) of the muscular

coats of the large bowel. It consists of paroxysms of greater or less degree of pain, generally very severe, felt more particularly about the navel, and thence, extending upward or out over the abdomen. The pain is sharp, griping, tearing, cutting, or gnawing, coming on in paroxysms lasting a few moments and then remitting; sometimes the abdomen is drawn in, and at other times distended like a drum; pressure generally relieves the pain in colic, while in inflammation the pain is similar, but the abdomen is very sensitive when pressed upon, and in severe cases, cannot bear even the slightest pressure. Sometimes the pains are accompanied by costiveness, and often by vomiting or diarrhoea. In colic there is seldom fever or heat of the surface, or a quick pulse, or pain on pressure, all of which are characteristic of inflammation. It may also be distinguished from *hernia*, or rupture, by the tumor either in the navel region or in the groin, which is always present and easily recognized in hernia; and from *enteritis*, or inflammation of the smaller bowels, by lack of the accompanying fever and by *extreme tenderness of the abdomen*, as well as by an absence of complete intermissions of pain.

Colic may be caused by excess in diet, flatulent food; dissipation; grief; cold, or anything that induces derangement of the digestive organs, or constipation of the bowels. Sometimes it arises from stricture of the intestine, or may in rare cases arise from cancerous disorganisation of some portion of the intestine, or from *intussusception*.

*Flatulent, or wind colic*, is common in children who are fed with improper diet, and in dyspeptics after the use of heavy, improper or flatulent food.

*Bilious colic* is generally preceded by symptoms of biliary or gastric derangement, such as: Yellow-coated tongue, bitter taste, loss of appetite, dull headache. There is generally nausea and vomiting; severe cutting, writhing pain, with thirst and anxiety; pain more especially extend-

ing from above the umbilicus towards the liver; coming on in severe, intense paroxysms. The pain is relieved after vomiting and discharge of free, bilious stools.

*Lead colic or painters' colic* is produced by the exposure to the action of lead, (especially the oxide of lead and white lead) and is common among painters and among workers in lead factories, or in smelting ores. The most dangerous modes by which lead is introduced into the system are its absorption by the respiratory apparatus, as by the continued inhalation of the dust or vapour of lead by workmen, and by taking food with hands soiled with that form of the poison they are in the habit of using; this explains why workers in lead-mines, and in white-lead factories, painters, potters, type-makers, and others, are particularly liable to lead-colic. Less frequent causes are—indulgence in snuff wrapped in tinfoil, wine sweetened by sugar-of-lead, the preparation of food in leaden vessels badly glazed, and water contaminated by passing through leaden pipes.

Lead-colic has also been observed in cows feeding on the fields in the neighbourhood of lead-mines and in animals drinking water from rivers which originate in lead-mines. The symptoms are: Loss of appetite, restless sleep, and nervous excitability. This is succeeded by vomiting, pain in the abdomen, coming on at first in paroxysms, but gradually becoming continuous. There is but little fever, but headache, pain in the limbs, and obstinate constipation, and sometimes even paralysis of the extremities. A bluish line along the edge of the gums may be often noticed in persons suffering from lead-colic.

TREATMENT.—In general, and for ordinary attacks of colic, the SPECIFIC No. **Five** is the proper remedy, and will be found efficient. Should, however, the disease have been caused by heavy or indigestible food, or be accompanied with symptoms of gastric derangement, such as a coated tongue, bad taste, flatulence, etc., it will be well to alternate

the SPECIFIC No. **Ten** with the No. **Five**. Dissolve twelve pellets of each Specific, in six large spoonfuls of water, in separate glasses, and of these give alternately, every fourth or half hour, until relieved. This is the mode of procedure in all severe cases of colic from whatever cause, except that in cases where the bowels become tender, or sensitive on pressure, there may be some fever, showing a tendency to the development of inflammatory action. In these latter causes, the SPECIFIC No. **One** should be prepared and given in alternation with No. **Five**, in the manner indicated above. Simple, uncomplicated spasmodic colic, yields promptly to the SPECIFIC No. **Five**, administered in water, six pellets every fifteen or twenty minutes.

In all cases of severe colic it is advisable, and in all obstinate cases, it may be necessary to administer to the patient, and the more so if caused by indigestible or noxious substances, INJECTIONS OF WARM WATER. To a pint of warm water, add a tablespoonful of salt, and with a good syringe, pump it into the abdomen. If the patient can retain it a little time, it may be more effectual, and these injections should be repeated until, in connection with the medicines, relief is obtained. Hot flannels may be laid over the abdomen.

DIET.—It is obvious that little or no food, and that only of the lightest kind, such as oat-meal gruel, rice-water, toast-water, or some light soup, should be given until after the disease has yielded.

Persons subject to attacks of colic should be specially careful in avoiding the occasioning causes of it, such as indigestible food, the use of beans, cabbage, krout, or green vegetables, acidulated drinks, or veal or young meat; and should also be careful to keep the feet and abdomen dry and warm. They may also find benefit by wearing flannel around the abdomen, and keeping the feet well-protected from the damp.



The use of the SPECIFIC No. **Ten**, six pellets at night, will also do much to correct the digestion, and so prevent attacks.

PREVENTION.—*Change of occupation is necessary.* Some persons are much more readily affected than others; and, if one member of a family suffers from anæmia, nervousness, and debility of the upper extremities, while the others are in apparent health, the blue line on the gums should be looked for, and the condition of the water-supply, and other possible means of lead-poisoning, carefully inquired into.

### NAUSEA AND VOMITING.

Nausea and vomiting seldom occurs except as a symptom of some other complaint or disease. It generally proceeds from improper food or too large a quantity; a disordered condition of the digestive functions; pregnancy; disease or irritation in the other organs, as the brain, kidneys, uterus, etc.; cancer or ulcer of the stomach; mechanical obstruction of any part of the intestinal canal; morbid states of the blood; it also occurs in most of the eruptive fevers.

PROGNOSIS.—Nausea and vomiting occurring in diseases of the brain, as in epilepsy, are unfavorable indications; on the contrary, in pregnancy or hysteria, no alarm need be felt, as they are merely symptomatic of irritation conveyed by the nervous system to the stomach. We may learn much by observing the time of the occurrence of vomiting, the nature of the matters ejected, and the extent and urgency of the symptoms. If vomiting afford relief, and the nausea, oppression of the chest and stomach, and headache cease, the case may be considered favorable; if, on the other hand, the symptoms preceding vomiting are not relieved by it, but increase, the disease must be regarded as having taken an alarming form.

TREATMENT.—Should vomiting arise from over-repletion,



or from indigestible food, it may be regarded as a conservative effort, and should be encouraged, within proper limits, by drinking warm water, or tickling the throat with a feather until the offending material is expelled.

After the noxious substance has been ejected, the SPECIFIC No. **Six**, six pellets dissolved in a spoonful of water and given every hour, will soon allay the remaining irritation, and relieve the nausea. When it occurs in the case of pregnant females, consult what is said under that head.

*Sea sickness—Sickness from car or carriage riding.*—The peculiar sickness and utter wretchedness and prostration experienced by persons on first going to sea; and even, in a measure, by some persons from riding in a car, stage or wagon, is so well known as not to require description.

PREVENTION.—For several days before embarking, indigestible food, over-repletion, or any irregularity in diet, should be avoided.

TREATMENT.—It can, in most cases, be cured by the SPECIFIC No. **Twenty-Six** taken for some six or eight hours previous to sailing, if convenient, six pellets every four hours, permitting them to dissolve on the tongue.

During the early part of the voyage, unless the weather be very fine, the patient should remain in his berth in a horizontal posture, and take chiefly liquid food—beef-tea, chicken broth, etc. Good draughts of warm water, more often relieve than anything else. A girdle, moderately tight, round the waist and abdomen, or a stomach compress, have also been recommended. Warmth to the stomach and feet tends very much to prevent sea-sickness. Anything to amuse, and divert the attention from the waving lines of the horizon is useful.

After sailing, for the first two or three days, as a preventive, take six pellets every four hours; and should there, notwithstanding, be severe sickness, vertigo, nausea, or

vomiting, dissolve twelve pellets in half a glass of water, and take a dessert-spoonful every hour until relieved.

For sickness, nausea, or vomiting from riding in a carriage or similar motion, take of SPECIFIC No. **Twenty-Six** six pellets, every hour until relieved.

*Hæmatemesis—Vomiting of blood.*—This disease is known by the vomiting, or sudden ejection of blood from the stomach. It is generally preceded by nausea, distress or pain of the stomach, indigestion, a feeble pulse, pallor and other signs of fainting. The blood vomited is generally dark, rarely bright red, and is occasionally mixed with the food, mucus, bile, or other contents of the stomach, and is thrown off in large quantities; blood is also frequently discharged by stool, in coagula. It may be known from bleeding of the lungs, by reference to the accompanying table.

IF FROM THE STOMACH.—The blood is of a *dark color*; is *vomited*; is often mixed with *food*, and is *not frothy*; is preceded by *nausea* and *stomach distress*; is generally passed *with the evacuations* from the bowels.

IF FROM THE LUNGS.—The blood is of a *bright-red color*; is generally *coughed up*; is generally *frothy* and mixed with *sputa*; is often preceded by *pain in the chest* and *dyspnœa*; is not found in the stools.

Vomiting of blood is always preceded by more or less decided symptoms of gastric disturbance or weak digestion, such as: Pressure, weight, fulness, or tensive pain in the region of the stomach; burning heat in that region; anxiety or uneasiness on partaking of food or drink, or on pressure of the stomach; saltish taste in the mouth; impaired appetite and nausea; vertigo, faintness, or cold perspiration; sometimes, also, an intermittent pulse is felt at the pit of the stomach. If the attack is very severe, there may be delirium or wandering of the mind, accompanied with spasms, and gradually increasing weakness and remission of pulse, with frequent fainting. It is most frequently caused by the suppression of some habitual discharge, as from hemorrhoids or the menstrual flow. Other causes:

schirrhous, or internal lesions, or disorganizations of the stomach, or the use of poisonous or drastic purgatives, or an external contusion, or obstruction of some important viscera, may occasion congestion and the rupture of some vessels distributed over the surface of the stomach, and hence, become the immediate cause of the hemorrhage.

TREATMENT.—The first thing to do is to arrest the hemorrhage, and for this purpose HUMPHREYS' MARVEL OF HEALING is the most efficient remedy known, and may be given in doses of twenty drops, in a large spoonful of cold water, and repeated every fifteen minutes, until the bleeding is arrested, when it may be continued at intervals of an hour, or even a longer period, especially if the system seems exhausted, or there are yet indications of internal hemorrhage.

If there is fever or heat of the system, administer the SPECIFIC No. **One**, six pellets in a spoonful of water, and repeat every half hour. If the hemorrhage come on in consequence of the suppression or non-appearance of the menstrual flux, the SPECIFIC No. **Eleven** should be given every hour, either alone or in alternation with the MARVEL OF HEALING. The diet should be carefully considered; all solid food must be avoided, and all warm drinks. Animal jellies, preparations of milk, light puddings and broths, merely tepid, may be allowed in cases where the condition of the patient requires nourishment, but no more food should be taken than is absolutely necessary to sustain the strength, and for some hours after an attack, no food should be given, and then, only in small quantities, and very cautiously.

*Vicarious hemorrhage.*—In vicarious hemorrhage, as in females when bleeding from the nose or stomach takes the place of the menstrual discharge, the treatment should be directed to restoring the normal monthly function.

ACCESSORY MEASURES.—Calmness and judgment should be exercised, or the discharge of blood may cause alarm to the patient and his friends, and unfit them for carrying out the

measures necessary for the safety or even life of the sufferer. The patient should immediately lie down on a sofa or mattress, with the head and shoulders elevated: all tight-fitting clothes should be removed or loosened, quiet maintained, and no talking, crowding, noise, or confusion permitted; at the same time the room should be kept cool and airy—at about 55° Fahr. Ice is a most useful agent for arresting hæmatemesis, and it should be swallowed in small, oft-repeated pieces; it then comes in more immediate contact with, and tends to constrict, the bleeding vessels.

It also important in hemorrhage from the stomach, that the organ should have perfect rest. As long as any tendency to hemorrhage continues, the patient should remain in bed, and take nothing by the mouth except sips of iced-water. Food, beef-tea, etc., should be introduced by the rectum.

Should faintness occur, no alarm need be excited, because it is often nature's method of arresting the bleeding. After the hemorrhage, the patient must still be kept cool and quiet, and the diet be light and unstimulating, while the posture of the body should be such as to favor the return of blood from the bleeding organs. Should the faintness persist, iced champagne is often an excellent restorative, and is not likely to induce vomiting.

### CHOLERA MORBUS.

This disease is of frequent occurrence in warm climates, and during the warm seasons of the year. It is generally brought on by the use of unripe fruit, or that which is over ripe, or stale, such as melons or cucumbers; or eating too much, or too many, or incongruous things at a time, and being over-heated afterwards; sudden changes of temperature; over-fatigue, or too free use of ice or ice-water.

The symptoms are violent vomiting and purging; throw-

ing off the contents of the stomach and bowels at first, and afterwards bile; pain in the stomach and abdomen; thirst, and in severe cases, cramps, and coldness of the extremities; the face may also become pale, cold, bluish and sunken; features pinched, and cold, clammy-skin; and great anxiety and prostration, simulating an attack of cholera.

It is generally preceded by some symptoms indicating disturbance of the system, such as shivering, pain in the stomach, and nausea; but in some cases it makes its attack without sensible premonitions.

It is liable to come on suddenly at night, and, properly managed, is of short duration.

TREATMENT.—The No. **Six** is the proper remedy, and may be administered by dissolving twelve pellets in six dessertspoonfuls, of cold water, of which a spoonful may be given every fifteen minutes, until the discharges are arrested and the warmth returned to the surface. In extreme cases, with violent cramps, coldness and blueness of the surface and great anguish, with little or no discharges, a dose of two or three drops of spirits of camphor, in a teaspoonful of water, repeated every few minutes, will soon relieve. The No. **Six**, however, will be found promptly to arrest the disease. Diet should be light for some days, until the tone of the stomach is measurably restored.

### ASIATIC CHOLERA.

An infectious disease not highly contagious, supposed to be caused by the introduction into the system of the comma bacillus of Koch. This disease assumes an epidemic form, sweeping over vast sections of territory and numbering its victims among the thousands.

Our better knowledge of later years has enabled us to check and control this epidemic and to limit its scope of action.

The comma bacillus of Asiatic Cholera will be found in the stools and evacuations of the affected patients, espe-



cially in the rice water discharges of the later stages of the disease. They are less often found in other fluids and organs of the body, and rarely in the vomit.

During an epidemic the bacilli may often be found in the intestines of healthy persons, giving rise to looseness of the bowels without causing other symptoms of the disease, the so called Cholera Diarrhea, that is noted in persons not otherwise affected by the epidemic.

The grave and often fatal symptoms accompanying an attack of Asiatic Cholera is caused by the absorption of the toxic poisons secreted by the bacilli in the intestines. The symptoms are all those of toxic poisoning. The bacilli seem to thrive upon vegetables, cresses, salad plants and in butter or milk and upon cold meat and uncooked foods, hence the danger of eating any of these articles during an epidemic. Raw or uncooked food or unboiled water should be shunned by all. Hands and finger nails must be kept scrupulously clean.

The life of the bacilli is from six to eight days. They cannot be transmitted through the air, but are carried by direct contagion, and introduced through the digestive tract. The drinking water may become affected. The germs may be carried by flies and deposited upon food or utensils, or, unclean hands may bring the contagion. It has been noted that the attending physicians and nurses escape the infection, while washer-women and those handling the soiled linen usually succumb to the disease.

PRECURSORS. —1. It has been frequently observed that the cholera has been preceded by some form of influenza, attended with sneezing, discharge from the eyes and nose, hoarseness, sore throat, and cough. 2. It has also been observed that previous to the outbreak of cholera in a particular locality, bowel complaints, as they are called, diarrhea, dysenteries, colics, etc., have been much more frequent and obstinate, and less under the control of the ordinary remedies than usual; so that physicians, from these



manifestations among their patients, have been able to recognize the presence of the disease weeks before its final outbreak among the people. 3. Sudden attacks of cholera are more liable to occur at night and after midnight than during the day. Hence the necessity of every family being provided with prompt and efficient remedies to avoid the hurry, alarm and delay in sending for a physician in the night.

**SYMPTOMS.—CHOLERA DIARRHEA.**—Almost invariably an attack of cholera is preceded by a peculiar form of diarrhea. It may precede the cholera several days, as nothing more than loose bowels, attended with rumbling or borborigmi and slight nausea, or faintish feeling at the stomach; but usually it continues but a few hours, and is manifested with *frequent loose stools, rumbling and uneasiness* of the abdomen, and a *faintish, sinking sensation* at the pit of the stomach. This is the cholerine or cholera-diarrhea, and the immediate precursor or first stage of the disease, and demands prompt attention.

After the diarrhea has continued for a period varying from a few hours to several days, the second stage of the disease is ushered in with the following manifestations: **REPEATED EVACUATIONS**, attended with great prostration, at first, of the usual contents of the intestinal track, then gradually becoming more thin, watery and flocculent, until they present the true cholera characteristic of **PROFUSE RICE-WATER EVACUATIONS**; vomiting in sudden, violent attacks, with copious discharges; first of the contents of the stomach, then of thin serum or the characteristic rice-water-like matter; attended with frequent cramps, first in the fingers, toes, and calves of the legs, then over the entire person, especially the abdomen, knotting up the limbs, and causing exquisite anguish. The breath becomes cold, the lips and tongue cold, the skin dry, inelastic, pale or leaden-gray, or a bluish-violet around the eyes and at the ends of the fingers and toes, and point of the nose, the hands becoming

shrivelled like a washer-woman's. The face becomes peculiar in extreme cases, eye-balls glazed and turned up, pupils dilated, the upper eyelid drooping, the lower surrounded by a bluish half-moon; the color is pale, varying from a leaden gray to violet; the skin on the lips, cheeks, and point of the nose is glazed, nose pointed, cheeks sunken, upper lip drawn upward, the nostrils and cartilage of the ear very movable and wrinkled from the nose to the corners of the mouth, presenting a frightful and ghost-like appearance. The voice becomes hoarse, whispering, or lost. The pulse at the wrist is very soft, small and disappearing during an attack of spasms, and later becomes thread-like and imperceptible. Gradually the anguish and indifference, the coldness and blueness and prostration become more decided, until the patient sinks into a condition of absolute collapse, succeeded by death after some hours. During the attack, the secretion of the urine, the bile, the saliva, perspiration, and even of the tears, is entirely suppressed, and the reappearance of these secretions is a most favorable indication. With these manifestations of coldness, blueness, and shrivelled skin, and even cold breath, the patients yet complain of burning heat, long for ice and ice-water, and dread all heating applications.

Not always does the cholera present the above picture. Different epidemics have presented varieties in the symptoms which are very decided. Thus the disease has been divided into three stages, called the PREMONITORY, the stage of COLLAPSE and the stage of CONSECUTIVE FEVER.

The first, or PREMONITORY stage, is manifested by symptoms of indigestion, flatulence, weight or oppression at the pit of the stomach, slight nausea, acidity, diarrhea, vertigo, some form of headache, or ringing in the ears. These symptoms may continue some time, but occasionally pass off altogether, leaving the patient well, though this is rare; and unless proper remedies are used, the symptoms above

mentioned continue to increase until the second stage is ushered in.

SECOND STAGE—STAGE OF COLLAPSE.—The stools at first feculant and bilious, now become characteristic; they appear like thin gruel or rice-water; sometimes they are limpid, intermixed with small flakes of curdy-looking matter; at others they look like water in which fresh beef has been macerated; sometimes the stools are even darker, looking like the dregs of wine. There is no natural smell from the stools, but a faint, peculiar odor, which also arises from the body. The desire to go to stool is irresistible and instantaneous, and sometimes with great tenesmus, accompanied by griping. Generally the stools are very copious—sometimes, however, they are scanty, often accompanied with discharge of noisy flatus from the bowels. There is *burning heat* in the pit of the stomach, and vomiting of large quantities of similar matter as the stools. The thirst is intense, with urgent desire for cold water. The mind generally remains clear, or comparatively so, but the vertigo and ringing in the ears increases. Cramps are almost universal attendants—sometimes confined to the fingers and toes; at others, affecting the legs and arms, and often the body, particularly the abdomen. The urine is generally suppressed; the voice is whispering. The respiration, though weak, is often natural, even when the pulse is scarcely perceptible at the wrist; occasionally, however, the breathing is hurried, oppressed, laborious. The pulse becomes weak and rapid early in the disease, even when the action of the heart is strong and tumultuous; but, frequently, both the pulse and heart are feeble. As the disease progresses, both become fainter and weaker; the pulse is only now and then felt like a “flutter,” and often ceases at the wrist some hours before death. The tongue is cold and shrunk. The restless tossing, uneasiness, and impatience of the patient is pitiful; especially, when they are restrained, or when heat is applied, of

which they seem to have a horror. The temperature of the body, especially of the extremities, diminishes early in the disease, and constantly sinks, until after death, when it gives place, for a time, to a genial warmth. As the disease progresses, the hands, feet, nails, face, and even the entire surface of the body, becomes ashen, leaden-gray, or blue, and this color remains or deepens until reaction occurs. Blood drawn from a vein or artery during this stage is of dark color, flows with difficulty, and does not coagulate. The surface of the body is covered with a cold moisture, the features and eye-balls shrink, and death closes the scene—sometimes very unexpectedly, and at others, the body seems to be long dead, while the functions of the brain are still going on, and comparatively normal. In some cases the prostration of strength is great, but in others not so apparent.

Symptoms of improvement and recovery from the second stage are usually: Diminution of the number and quantity of the evacuations, both by vomiting and stools; cessation of the restlessness and tossing about; diminution of the cramps and thirst; increase of the strength and fullness of the pulse, and increase of the temperature of the body; more natural and animated expression of the countenance, and disposition to sleep; later, change of the stools from the watery to bilious and feculent matter; reappearance of the secretion of the urine. When these symptoms are manifested, they indicate the safety and early convalescence of the patient.

CONSECUTIVE STAGE.—In some rare cases, and in some epidemics more than others, patients instead of rallying at once from the second stage, slide over into what has been termed a THIRD STAGE, or a TYPHUS CHOLERA, coming on after this fashion: The reaction has been established and patients seem to be doing well, not having tenesmus or vomiting, nor cramps, or any unusual degree of thirst, and the restlessness has passed off, and the patient seems to be

tranquil. But gradually, symptoms of coma, deep sleep, or delirium come on, and there may be convulsions, partial paralysis, rigidity of the flexor muscles of the extremities, distressing nausea, bilious vomiting and thirst, difficult breathing or hurried respiration, cough, expectoration, palpitation or irregular action of the heart, more or less heat of the surface, bilious diarrhea, dark port-wine stools, tenesmus and pain or tenderness increased on pressure in some part of the abdomen. These symptoms may be variously combined and modified in particular cases, and may continue from four or five to fifteen days, ending in death, or the gradual recovery of the patient.

**HYGIENIC PRECAUTIONS TO BE OBSERVED DURING THE PRESENCE OF THE CHOLERA.**—All experience has demonstrated that the disease riots among the filthy, ill-fed, ill-clad, and ill-housed multitude; that its especial play-ground is along narrow streets, confined areas, ill-ventilated dwellings, low, damp, or confined apartments, and that the disease is much more intense and concentrated in such localities than elsewhere, and its attacks far more intense and fatal. Hence, *cleanliness*, both of persons and habitations, is of the first importance. The yard, gutter and cess-pools, should be cleansed often, and kept clean, and frequently sprinkled with chloride of lime, or plenty of lime, and the adjoining walls should be repeatedly whitewashed. No stagnant water should be permitted in the cellar or yard, and if the basement is damp, fires should be kindled daily to expel foul air, and afford better ventilation. All garbage should be removed daily, and nothing suffered to remain on the premises to be decomposed. Houses should be daily ventilated. Avoid damp, low habitations, and in selecting a residence, the higher and more airy the situation the better. Narrow lanes and alleys, cellars and basements, and crowded apartments should be especially avoided.

The **USUAL HABITS** of eating, drinking, living, and business, should be followed, except when absolutely interdicted. Rash changes should be avoided. Temperance in eating and drinking, exercise and labor, both physical and mental is specially enjoined. Keep good hours. Take proper food in reasonable quantities, at proper times. Plainly cooked meats, lamb, beef, mutton, or fowl, with boiled rice or hominy, stale bread or crackers, and well-cooked potatoes, should form the ordinary staple of diet. If wine or spirits are habitually used, they may be continued in moderation, but to persons not accustomed to them, they are especially objectionable and to be avoided. Drunkenness or debauchery powerfully invite the disease. Abstain from all unripe fruits, or stale, wilted, or overkept vegetables. Fruit of all kinds should be avoided, it induces loose bowels. Cucumbers, salads, lettuce, cabbage, or krounts, soda-water, root-beer, melons, turnips, or unripe potatoes, are articles especially to be avoided. Beer, cider, mineral-waters, are objectionable. Purgative or cathartic medicines, by relaxing the integrity of the intestinal canal, may give rise to a sudden and fearful attack of the disease. Avoid exposure and sudden changes of temperature, and at all times keep the body sufficiently warm and protected, especially the abdomen. To this end wear flannel next the skin, at least around the abdomen. Keep the feet and legs well protected and warm.

Above all things, maintain an even, cheerful tone of mind. Hurry, fright, fear, anxiety, and all depressing emotions, tend to lower the vital power, and so invite the disease, while a firm determination to do our duty.

**PREDISPOSING CAUSES.**—Chronic diarrhea predisposes the system for it, as do all prostrating or debilitating habits or excesses.



Depressing emotions, such as fear, gloom, despondency, anything that tends to lower the tone or resisting powers of the system.

PREVENTIVE TREATMENT.—The homely adage, “an ounce of prevention is better than a pound of cure,” was never more clearly manifest than in this disease. Dirt, filth, irregular habits, and vice, aid the disease, while cleanliness, regularity, and order, keep, it at bay. Aside from the hygienic observances enjoined above in regard to *living*, *labor*, and habits of thought, we earnestly recommend, also, the use of a simple medicinal prophylactic or preventive. Experience has amply demonstrated the utility of medicinal prophylactics. It has abundantly shown that small-pox, scarlet-fever, measles, whooping-cough, and fevers, as well as cholera, can be prevented by fortifying the system by appropriate medicinal influences. Not, indeed, by drugging, overwhelming and thus depressing the system, but by the judicious use of the (similar) HOMEOPATHIC remedies which, by prevading and pre-occupying the system, fortifies it against, and thus prevents an attack of the disease. Hence, we advise the use of the No. **Six**, in doses of six pellets, morning and at night, as a prophylactic for the cholera.

DIRECTIONS.—Live temperately; avoid the predisposing causes of the disease as before mentioned; and take each morning, on rising, or before breakfast, and each night on retiring, six pellets of the No. **Six**. Children need but one-half as much as adults. In families, the best manner is to place the proper number of pellets for each person in a glass, and add a large spoonful of water for adults, and a teaspoonful for children, and so give them, morning and night, while the disease prevails. Travelers may simply take them dry on the tongue, if other conveniences are wanting. The result will be, that if the attack occur, it will be in a modified and very mild form.

TREATMENT OF THE CHOLERA DIARRHEA, *or premonitory*



*Stage of the Disease.*—The earlier symptoms of the disease are: A sense of uneasiness, or sinking at the pit of the stomach, rumbling, borborigmi in the bowels, and loose stools or diarrhea. Sometimes, to these symptoms are added, acidity of the stomach, griping pains in the abdomen, vertigo or headache, and ringing or noise in the head.

As soon as the above symptoms, or even the diarrhea alone has declared itself, the patient should retire at once to his home, or room, and lie down, taking six pellets of the No. **Four**. If the symptoms are but slight, that is, only some diarrhea, and slight uneasiness of the bowels, repeat the dose every hour, or every two hours. But if the stools are urgent or frequent, with uneasiness and nausea, vertigo and sinking at the stomach, repeat the dose every half hour until relieved.

If the diarrhea should not yield in, say four or six hours, under the influence of the No. **Four**, administered as above directed, and the disease threatens to pass over into the second stage, indicated by more frequent or urgent stools, coldness, nausea, or some faintness at the pit of the stomach, then omit for a time the diarrhea remedy, and give the No. **Six**, repeated every half hour, in its place. In rare cases the CAMPHOR has been efficient in checking the diarrhea, in doses of two drops of the tincture on a bit of sugar, every half hour.

IT IS OF THE UTMOST IMPORTANCE that the patient should lie down in bed, get warm, keep well covered, with a bottle of hot-water, or hot bricks, to the feet, if necessary, and so remain warm and in bed, until the diarrhea, rumbling and uneasiness has passed off. Being about, or frequently getting up, and running out, is very prejudicial, and most surely tends to prolong and keep up the disease.

Avoid TREPIDATION, OR HURRY, unnecessary anxiety, or alarm in prescribing for yourself or others. Do not multiply doses, or measures of relief, from which nothing is permitted to avail; but give every dose carefully, and then

give it time to act, and afford relief, and only when one has failed, give another. Nothing but Homeopathic medicines must be given under Homeopathic treatment. All other medicines, or means, interfere and must not be allowed.

THIS STAGE MAY END in health: By the stools becoming less frequent and finally natural, the rumbling, uneasiness of the bowels disappearing, and the sinking or anxiety at the præcordia going off, or:—it may terminate in the next stage by the stools becoming more frequent and fluid, the uneasiness and sinking increasing, until vomiting comes on with the characteristics of the second stage.

TREATMENT OF THE CHOLERA PROPER, *or Second Stage of the Disease*.—This stage is known by profuse, thin, flocculent, or rice-water-like evacuations coming on suddenly and frequently. Sudden vomiting of the same or similar material, attended with cramps in the extremities, or even body, and great coldness or blueness of the surface, anxiety and prostration, and other symptoms, as before described.

Where this condition, PROFUSE VOMITING AND DIARRHEA, is present, the No. **Six** is only required, of which give six pellets, either at once upon the tongue; or better, in a spoonful of cold or ice-water, and repeat the dose, EVERY FIFTEEN MINUTES, according to the result; and so continue until the cramps, the vomiting and diarrhea have abated, when the intervals between the doses may be prolonged to half an hour, and then, gradually, as the patient improves, to intervals of an hour or more.

THE PATIENT SHOULD AT ONCE go to bed, and if possible, not get up to attend to the evacuations, but use a bed-pan, or other convenience, for that purpose. Bottles of hot

water, or hot bricks, should be placed to the feet, if the patient can bear them. Give nothing but the medicine and small sips of ice-water; or better, give from time to time small pieces of ice, to remain in the mouth to allay the thirst. These are better than water or other fluid, more grateful, and less likely to provoke vomiting, stools or griping. Let the patient remain quiet as possible after the storm is over, and if he falls asleep, do not waken him, even to administer medicine.

TO ALLAY THE CRAMPS, it is better to grasp and hold the knotted limb or part in the warm, firm hand, than merely to rub the surface, as you may, by severe rubbing, easily excoriate the surface, without relieving the cramp, while the warm pressure of the hand is very grateful and effective.

IF THE ATTACK occurs in the following form from the first, or, if in the course of the disease this condition is developed, viz.: but little, or only slight vomiting; or purging, or scanty evacuations, but great dullness or confusion of the head, severe, frequent, long-continued cramps, predominant coldness and blueness of the surface, loss of voice, and *weak, thread-like, or wanting pulse*, give at once five drops of SPIRITS OF CAMPHOR, in half a teaspoonful of cold water, and repeat the dose every ten minutes, or even every five minutes, in extreme cases, until the returning pulse, or warmth of the surface, and returning evacuations show the reaction of the system to have come on. Then gradually omit the CAMPHOR, and return to the use of the SPECIFIC No. **Six**, which continue every fifteen or thirty minutes, and at longer intervals, until entire relief is obtained. The camphor is the best remedy to arrest the *sinking, coldness, blueness, failing pulse*, and tendency to absolute collapse; and when the evacuations have ceased, or nearly so, a few doses, given at intervals of five or ten minutes, will promptly bring up the pulse and warmth to the surface, and with this reaction the vomiting and evacuations may again return.

Then the SPECIFIC NO. **Six** comes again in use and may be continued as above mentioned, a dose of six pellets every ten or twenty minutes, until the evacuations have ceased and relief is fully pronounced.

AFTER THE STORM has passed over, and the vomiting, diarrhœa, and cramps have vanished, and returning pulse, warmth, sleep, and rest, and secretions have become re-established, a little nourishment may be given. This should consist of very light meat broth, and in very small quantities at first, as experience has shown that the stomach long remains weak after an attack, and heavy or indigestible food, or any food in too large quantity, may easily provoke a relapse, always more dangerous than the original attack. Hence, give at first a little weak black tea, or chicken or lamb broth ; afterwards boiled rice, toasted bread, and only very gradually return to a more substantial diet.


The patient will remain weak and enfeebled for some time, and not unfrequently, the digestive organs are long in regaining their former strength and vigor. For this debility, beer and good malt liquor have proved beneficial. Too free perspiration diminishes the strength ; and slight mental excitement, too much warmth, too much drink or food, cause anguish, palpitation, small, soft pulse, vomiting or diarrhœa, uneasy sleep, and extreme debility.

THE SECOND STAGE MAY TERMINATE in convalescence, indicated by : Diminished violence and frequency of the evacuations, first the vomiting, later the diarrhœa ; diminution of the cramps ; increasing strength and fullness of the pulse ; returning warmth of the surface ; more natural expression of the countenance ; less tossing about, restlessness and jactitation ; diminished thirst ; bilious stools ; natural warmth of the surface, return of the natural secretions, urine, saliva and perspiration ; quiet, tranquil sleep ; or, this condition may slide into the THIRD STAGE indicated by the following symptoms :—

Diminished vomiting; great indifference; extreme prostration; the patient, lying on the back, sinks down towards the foot of the bed; some return of warmth or moisture to the skin; increasing lividity or blueness of the surface, and the *blue, sunken, pointed CHOLERA FACE*; the pulse cannot be felt, and later, not even at the carotids or heart; eyes dull and glassy; only occasional and not characteristic vomiting and diarrhoea; later, the stools are involuntary, as if coming from a spout; respiration labored, rattling and almost ceasing. This stage may last from one or two hours, to as many days, and usually terminates in death, preceded by cold, clammy sweats, complete cessation of circulation and respiration, and final paralysis of the lungs.

TREATMENT.—In this stage of entire collapse, which may last a day or two, the patient is not absolutely hopeless, and should be carefully and judiciously treated. The case will doubtless be placed in the hands of a competent Homeopathic physician, who, by the alternate use of Carb. veg. and Arsenicum, administered every hour, may save the patient.

As the pulse comes up, the medicine may be given at longer intervals. It is useless, and often cruel, to make hot applications to the patient, who, however cold, complains of heat, and refuses all covering. Hence, make them comfortable, covering only as decency and the weather requires, give the medicines and patiently await the result.

 I have prepared a case of three large VIALS of Specifics for the special treatment of CHOLERA, and in case of the prevalence of this disease, I recommend its use, as the Specifics are in fluid form, and in larger quantities and more reliable during an epidemic. If the case of Cholera Specifics is used, it is only necessary to substitute drops for pellets, or adopt the directions which come with the case.



DIARRHŒA.—(*Looseness of the bowels*).

This is a condition of the bowels in which they are moved more frequently than in health, and the stools are more or less fluid in form. The stools may be very numerous, or only two or three in the twenty-four hours, and may be of almost every variety of character and consistence.

Simple frequency of evacuation may exist while there may be no increase in the quantity of fæcal matter discharged, or it may even be deficient. True Diarrhœa depends upon defective absorption of the intestines, so that an excess of matter passes through them, and less is taken up for the nourishment of the body.

Sometimes, loose bowels or a transient diarrhœa is merely the salutary effort of the system to rid itself of some injurious or indigestible substance; and hence, when there is reason to suspect such a condition, it is proper to wait a reasonable period before attempting to arrest it, and only when the condition is clearly morbid, seek to control it by the proper means.

When the evacuations seem to afford the patient relief, it is safe to wait a day or so to see if it is not merely a salutary effort of nature, and which will speedily correct itself.

The chief forms are: *irritative diarrhœa* (from excessive, stimulating, irritating, or impure food or drink); *congestive or inflammatory diarrhœa* (from cold, cold drinks or ices when the body is overheated, checked perspiration, or suppressed accustomed discharges); *diarrhœa lienterica* (or discharges of unaltered food from arrest of the digestive and assimilative functions); and *summer-diarrhœa*.

SYMPTOMS.—Nausea, flatulence, griping pain in the bowels; followed by loose motions, which may vary as regards *consistence*—being fluid or watery; in their *nature*—slimy, bilious, or bloody; and in their *odor* and *color*. Furred tongue, foul breath, and acrid eructations, are generally



superadded. The circulation, breathing, and other functions are usually unaffected. In *summer-diarrhœa*, the discharges are chiefly bilious, and there are often violent pains in the abdomen, cramps in the legs, and great prostration.

CAUSES.—1. *Over-repletion of the stomach* may occasion irritation and diarrhœa by the mere quantity of the aliment introduced, but these results more commonly follow the *mixture* of various kinds of food and drink in one meal. 2. *Indigestible kinds of food*.—Such are, especially,—sour, unripe, or decaying fruits or vegetables; badly-cooked food; fatty and rich food; various kinds of shell-fish; *putrid* or *diseased* animal food. Numerous proofs have been often furnished in the public journals that the flesh of diseased animals is extensively sold for human food. 3. *Impure water*,—contaminated with sewage or sewage gases, or with decomposing animal matter, is almost certain to occasion diarrhœa, especially in recent visitors to a neighbourhood supplied with such water. 4. *Atmospheric influences*.—The heat of summer, the hot days but chilly nights and mornings or autumn, are frequent exciting causes of diarrhœa; so is the application of cold to the perspiring body, or the sudden checking of perspiration. Hot weather is a frequent exciting cause of diarrhœa, called on this account, Summer or “English Cholera.” Probably, to the influence of the change of temperature—from the excessive heat of the day to the cool of the evening in the autumnal months—may be added that of bad drainage, and the impurities which then exist in our rivers and springs. 5. *Mental emotions*.—The depressing influences of fear or anxiety, or the violent excitement of anger, are frequent exciting causes. “A sudden fright,” writes Sir Thomas Watson, “excites in many persons the action of the bowels as certainly as, and much more quickly than, a *black-draught*.” 6. *Functional or organic disease*.—Diarrhœa is often a symptom of other diseases arising from local or constitutional causes, as in enteric

fever; and in hectic fever, and phthisis, when it is called *colliquative* diarrhoea, because it appears to *melt down* the substance of the body; *cachectic* diarrhoea, as from chronic malarious diseases; *bilious* diarrhoea, from excessive flow of bile, as in hot weather or after passing a gall-stone. Looseness of the bowels is a very common precursor of cholera, when that disease is epidemic.

The irritation of teething in children is one of the most frequent causes of diarrhoea, and it is generally observed that teething children who have diarrhoea, are less liable to serious illness than those who have constipated bowels.

Diarrhoea, also, usually comes on at the close of several diseases, as some forms of fever, measles and consumption.

TREATMENT.—The SPECIFIC No. **Four** is appropriate for almost all forms of diarrhoea and loose bowels, and will speedily control it. It may be given dry on the tongue, six pellets at a dose, and repeat at intervals of from an hour to two or three hours, according to the urgency of the case. Should the stools be loose, thin, watery, or urgent, and especially if there should be some nausea or vomiting, the SPECIFIC No. **Six** should be given in alternation with No. **Four**, as before directed. Should there be pain, griping, or straining, showing a tendency to dysentery, the SPECIFIC No. **Five** is appropriate, and may be given alone, or in alternation with the No. **Four**.

DIET AND GENERAL MANAGEMENT.—Rest and quiet are very beneficial in all severe cases of diarrhoea. The patient should avoid acids, coffee, and all highly seasoned or salted articles of food; also, all fruit, eggs, oysters, and chicken or veal. The diet should be: Stale bread, rice, hominy, oat-meal, barley, or drinks made from these; milk, thickened with flour; or mutton-soup, thickened with rice or oat-meal. As the appetite returns, the diet may be more liberal, but still care and discretion should be exercised in the selection of food until the disease is arrested.

**ACCESSORY MEANS.**—The extremities should be kept warm, and exposure to cold or wet avoided. Rest, in the recumbent posture, is desirable in acute cases. Severe griping pains may be relieved by heated flannel applied to the abdomen, dry, or wrung out of hot water. A roll of flannel, fitting moderately tight around the abdomen, is very comforting, and hastens the cure. Persons liable to diarrhœa should always wear flannel abdominal-belts. Night air and late hours predispose to attacks. Except in severe cases, moderate out-of-door exercise should be taken daily. On recovery relapse should be guarded against, by careful avoidance of improper food, clothing, exposure, mental excitement, or over-exertion.

**CHRONIC DIARRHŒA.**—Is quite common in the hot climates or where persons have been long subjected to unfavorable influences of climate, exposure or bad food. It is often, also, the result of badly-cured fevers and diseases of the liver, and a not rare result of an imperfectly cured dysentery. It may also be the result of scrofulous disease of the bowels, tubercular deposits, or degeneration of the follicular and mucous surface, or of ulceration. The stools vary according to the seat, location, and character or nature of the local degeneration from which they arise. They are however, frequent, more or less liquid, sometimes mucopurulent, or may at times be even blood-stained or mucus. They are usually accompanied by general prostration, impaired digestion, emaciation, or other evidences of organic disease.

**TREATMENT.**—The alternate use of SPECIFICS No. **Four** and No. **Five** have proved curative in numerous cases. Six pellets may be given at a time, dry on the tongue, and repeated every four hours, in alternation. For diet, consult what is said under diarrhœa.

## CHOLERA INFANTUM.

Few diseases are more destructive among young children than *Cholera Infantum*. It prevails principally in our cities and larger towns during the hot or summer season, and is mostly confined to children under two years of age. It is much more liable to attack those who are reared on the bottle than those that nurse, and far more fatal or destructive among those who are ill fed, or are living in close, ill ventilated or low rooms, and in the close streets, than among those who have better or larger apartments, or purer air. Oftentimes removal to free country air and the use of pure, wholesome milk, is sufficient to effect a cure. To those who cannot remove to the country or to the sea side, the riding on our rivers or bays, in a cool, well shaded boat, is a precious resource.

**SYMPTOMS.**—The disease generally commences in the form of *diarrhœa*, with frequent, thin or watery stools, which are whitish, yellowish or ash-grey, sometimes green or greenish, having a very penetrating, peculiar odor, or sometimes a sourish or sweetish, fresh smell. After a few days, and sometimes from the first, nausea and vomiting is associated with the diarrhœa. The stomach becomes very irritable, vomiting everything that is taken, within a short time, so that nothing seems to be retained. The stools become more frequent or profuse, and the emaciation progresses from day to day. There is usually decided thirst, either from the beginning or after a few days, and the child eagerly watches and greedily drinks of the proffered fluid, often only to have it vomited up again, unless given in very small quantities. Unless relieved, the stools increase in frequency, or become only occasional, but are excessive in quantity and offensive; the uneasiness, thirst and vomiting increase; the emaciation progresses; wrinklies form about the nates; the neck becomes thin; the skin hangs in folds

about the arms and legs; the face is sallow, pale and shrunken, and the features have an old look; the eyes become dull, and the patient sinks into a stupid slumber, or glides into an “*encephaloid*” condition which, after a day or two, closes the scene.

Sometimes the attack is much more sudden, the child from the beginning having vomiting and repeated thin, watery stools, with rapid sinking and collapse of the system. In the first case the disease may run from three to twelve weeks, until the child is reduced to a skeleton; or in the latter, or more acute attack, the patient may sink in three or four days.

**TREATMENT.**—In the treatment of this disease the diet and air of the patient are of first importance. Children who nurse have a much better chance than those brought up by hand, and goat’s milk is often better than that of cows, especially for very feeble children. Good, healthy, country air, by preference in an elevated region, or at the sea side, and fresh-drawn cow’s milk are usually the best sources of restoration, and place the system in the best position to be aided by medicine.

At the first indication of DIARRHŒA, or relaxed bowels, give SPECIFIC No. **Four**—two pellets, which may be given dry in the mouth, and repeated every two hours—and this medicine may be continued through the entire course of the disease, prolonging the intervals between the doses as the patient improves, or even giving it every hour if the stools are as often, or are *very* frequent. When we have diarrhœa remember to avoid all acids, fruits, tea, coffee, eggs, oysters, chicken or veal, or soup made from them, but use milk, thickened, if need be, with flour, or rice water, or farina. If the child nurses let it be confined to the breast as far as possible, recurring to the above only as auxiliaries.

If the stomach has become *irritable*, the child *vomiting* or *nauseated*, throwing up its food or drink from time to time,



the SPECIFIC No. **Six** is demanded, and should be prepared by dissolving *twelve pellets* in six teaspoonsful of water, in a glass, of which, after well stirring, a spoonful should be given every hour, and this should be continued until the vomiting and nausea are allayed. Should the diarrhœa continue, and the nausea or vomiting be only abated, but not entirely subdued, and more especially if the stools are quite large, thin or watery, then give the two above mentioned Specifics in alternation, at intervals of one or two hours, according to the urgency of the symptoms, giving two pellets of No. **Four**, dry one time, and a spoonful of the solution of No. **Six** the next time, and so on in alternation, so long as the condition requires. Care must be taken in this irritable condition of the stomach *not to give the child food or drink too often, or too much at a time*. Give a few spoonsful, or let it nurse a few moments, then after one or two hours give again, for the stomach often retains a few spoonsful when a larger quantity is rejected, thus increasing the irritability.

If the child moans, frets and worries, is sleepless or tossing about, you can interpose occasionally, as an inter-current remedy, a few pellets of SPECIFIC No. **Three** with advantage.

### DYSENTERY.

Dysentery generally prevails in the late summer and fall of the year, when the days are hot and the nights cool. It is often epidemic, but may be induced by exposure to drafts of air, over-exertion, sitting on the damp or cold ground, use of acid or unripe fruits, or stale fruits and vegetables, melons, cucumbers, etc.

CAUSES.—“I believe dysentery to be caused by the action of a poison in the blood having a peculiar affinity for the glandular structures of the large intestine. This poison I



believe to be a malaria generated in the soil by the decomposition of organic matter" (*Maclean*). The effluvia from dysenteric stools are infectious, and, consequently, are a cause of the disease.

It is liable to attack all ages and both sexes, but is more dangerous for infants, children, the aged, and females generally, than for men.

An attack of dysentery is usually preceded for some days, or in some cases only for a few hours, by precursory symptoms, such as: Sense of general depression, pains in the neck, back, or limbs, headache, loss of appetite, chilliness, heat, transient sweats, nausea or vomiting. Gradually there are colic pains passing about the bowels, in the navel region, and along the course of the colon; rumbling, and a feeling as if there was some foreign body low down in the rectum, producing an inclination to stool, and diarrhœa, or in some cases constipation.

The disease is characterized by pains in the abdomen, which pass from the navel region to the right, then up and across the abdomen and down the left side, and extending towards the rectum, terminate by producing the *tenesmus*, or urgent desire for stool. Usually these pains and *tenesmus* precede every stool, and often remain quite a time after it, and so there may be an almost incessant urging to stool, caused by the swelling and irritation of the rectum. This feeling of *tenesmus* or straining, a violent constriction of the rectum, is a characteristic of the disease. The stools are very frequent, often twelve, twenty-four, fifty, or more in the twenty-four hours. Sometimes the urgency is so constant that the patient can scarcely leave the vessel. The quantity is very small, often not more than a spoonful, and consists of mucus, fluid, or coagulated blood, more or less mixed with greenish or mucus masses, or membranous clots like scrapings of the intestines, with little or no fecal matter. Often there is fever, thirst, headache, hot, dry skin, acceler-

ated pulse, diminished urine, sleeplessness, and the abdomen is painful to contact.

The disease may continue eight or ten days, and terminate in recovery by the remission of the colic and tenesmus, stools becoming less frequent, more copious and feculent, warm perspiration, quiet and sleep coming on; or it may end fatally, with increase of violent symptoms, until peritonitis, or a typhus condition sets in. Under our treatment it is rarely fatal, except in quite young children, and generally terminates in health in four or six days.

TREATMENT.—The SPECIFIC No. **Five** is the appropriate remedy, and may be administered, if the stools are quite frequent, as often as every twenty or thirty minutes, in doses of six pellets for adults, dissolved in a small spoonful of water. Should there be considerable fever, thirst and restlessness, the SPECIFIC No. **One** may be given in alternation with No. **Five**, at the same intervals and doses until the fever is subdued, when the No. **Five** should be continued alone, at intervals of from half an hour, to an hour, diminishing the frequency of the doses as the disease is subdued.

DIET AND REGIMEN.—When the disease comes on, the patient should at once keep quiet; avoid exercise or labor of any kind; if possible, lie down, and confine himself strictly, during the whole course of the disease, to a porridge made of MILK and FLOUR WELL COOKED, or to farina gruel, or rice-water and boiled rice. No vegetables or fruit can be allowed, nor meat, nor meat-broths; and spirits, or stimulants of any kind, are absolute poisons. Use no other medicines of any kind. Opium only conceals the disease by quieting the pain and evacuations, while the hidden disease rages more destructively.

During the disease, if the evacuations are very frequent and the tenesmus or straining very distressing and painful, occasional injections of thin starch may be given, or the

patient may have an occasional seat-bath of tepid water. This course strictly followed will rarely fail to afford decided relief in from twelve to twenty-four hours.

### CONSTIPATION.—(*Costive bowels*).

This condition can scarcely be called a disease. It is mainly a symptom of some morbid condition of the system, upon the removal of which, this inconvenience is relieved. In many cases it is habitual, the stools are hard, dry and infrequent, which indeed often indicates a more healthy and vigorous condition of the system than a diarrhœa, or even soft, frequent stools. The philosophy of the condition itself is but little understood. The fecal matter is a secretion, and as this is eliminated, it passes into the common receptacle, the rectum, and there remains until the irritation caused by its presence, or the evolutions of the system, occasion its expulsion in the form of feces. Whether this expulsion shall occur every twelve, twenty-four, forty-eight, or sixty hours, or six days; or, as I have known in one case, fourteen or sixteen weeks, depends altogether upon circumstances. The fact of an undue or unnatural accumulation or retention, does not of itself constitute disease. It is an inconvenience, and may or may not occasion disease; or it may be occasioned by a morbid condition of the system. Whenever the morbid condition is relieved, the bowels will of themselves act naturally, and the retention will be relieved.

The difficulty itself is usually greatly aggravated by the means employed to cure it. Cathartic or aperient medicines may move the bowels for the time. But after the first operation is exhausted, the reaction of the system recurs, and the bowels are more constipated than before. Then new and larger doses, and stronger and more active medicines

are used, until an almost incurable condition is induced. It should be remembered that cathartics are always injurious in cases of habitual constipation, the disease often originating in dryness and irritation of the lining of the intestinal track, the very condition which cathartics engender and sustain. It may be safely averred that no case of habitual constipation was ever cured by cathartic medicines, while thousands of cases have been aggravated or rendered incurable by them. In *one* condition the operation of a cathartic or laxative medicine is allowable; when some hurtful or indigestible substance has been taken into the system, which does not pass off, and by its presence causes irritation, fever, pain, convulsions or other inconvenience. In such cases, a spoonful of castor oil acts as a prompt laxative, and removes the offending substance without drugging or medicating the system, and is altogether the safest and most efficient remedy. An ENEMA, of simple water, may always be resorted to in emergency, or may be taken daily until the Specific has had time to affect the system.

TREATMENT.—Persons subject to constipation will generally find some form of indigestion connected with it, and on the removal of this, the constipation will vanish. But they should, moreover, be careful in regard to diet; eat slowly, masticate the food sufficiently, choose relaxing articles of diet, fruits, wheaten grits, coarse bread, farina, puddings of rice, bread, and sauce of prunes, peaches, or plums. Use fresh beef, mutton, or lamb, and soups made of them, avoiding salted meats, cheese, rice, and bread or crackers made of superfine flour. Cold water should be used freely, and a glass drank on going to bed and on rising each morning, are important auxiliaries. At times, constipation has been induced and sustained by an insufficient degree of heat in the bowels, and this has been corrected by wearing a *flannel swathing around the bowels*.

A tablespoon of Russian or Mineral Oil taken an hour before retiring is most helpful.

Lastly, the habit of going to stool every morning should be persisted in; go regularly, wait a certain time, if at first, fruitlessly. With these helps, and use of No. **Ten**, six pellets dissolved in water, taken each morning and at night, the difficulty will be overcome, and regular, healthy evacuations established.

### PILES—HEMORRHOIDS.

This troublesome and frequently obstinate disease is very common. The symptoms are varied according to the character of the disease and the stage of its development. Most commonly there are discharges of blood from time to time from the anus, more frequently during a hard stool; but in some cases the blood may be discharged at other times, and frequently in quite large quantities, often attended with a feeling of relief. Tumors are frequently formed about the anus, or within the rectum, which come down or are protruded at every stool. They may be small, bluish, filbert or walnut size, or even much larger, single or grouped in clusters; sometimes painless, but often inflamed, painful and tender; and they may remain dry, or discharge, forming either mucus or bleeding piles. In some cases a violent itching and irritation within the rectum seems to be the predominant characteristic of the disease. During what is termed an attack of piles, the patient has a sense of fullness and heaviness of the abdomen, pain in the lower part of the back, fullness of the head or headache, failing appetite or indigestion, which is relieved often after a discharge of blood from the tumors.

CAUSES.—*Predisposing* are—a general plethoric condition of the system, or any circumstances which determine blood to, or impede its return from, the rectum; such are *sedentary habits; luxurious living*, especially the use of highly-seasoned food, wines and spirits; tight-lacing; pregnancy;

confined bowels; and disease of the liver. Residence in moist, warm and relaxing climates; soft, warm beds or cushions, and over-excitement of the sexual organs, may also be classed among predisposing causes. The *exciting causes* include anything which irritates the lower bowel, such as straining at stool, hard riding, and the use of drastic purgatives, especially *Aloes* and *Rhubarb*.

Probably the most potent causes of this disease are the indolent and luxurious habits of the wealthy, which, by diminishing tone, occasion plethora and a tendency to abdominal congestion. Accordingly we find piles much more prevalent among the wealthy than among the industrial and frugal classes.

Age and sex appear to exercise considerable influence on this disease. In early life, it is probably much more frequent in young men than in young women. The comparative exemption of young women is readily accounted for by the regular action of the catamenial function, which probably obviates congestion that might otherwise occur. At a later period, after the cessation of the menses, or during the pressure of the gravid uterus in pregnancy, congestion is apt to occur in certain neighbouring organs, and so give rise to piles.

It is common for old school treatment to excise these tumors in attempting a radical case. This only disposes of the results of the disease, leaving the causes still at work; and the consequence is that the tumors form again, either at the same place, but more frequently higher up, and in a more difficult and inaccessible locality. Our treatment requires no such expedients, as we possess the means of reaching the disease at its source, and of permanently curing it.

TREATMENT.—Persons subject to piles, should take much care in regard to diet. A fit of indigestion often brings on an attack of piles; hence, use easily digested, relaxing food, use some care in the selection of food, and much care in



properly masticating it. Graham bread, or that made of unbolted or coarse flour is best, and so is the free use of wheaten grits, farina, and other relaxing food. For medicine, the SPECIFIC No. **Seventeen**, six pellets, three times per day—morning, noon and night—for cases of chronic piles. If there is dyspepsia or indigestion also, the SPECIFIC No. **Ten** may be given in alternation. Thus, taking six pellets of SPECIFIC No. **Seventeen** before breakfast and supper, and the same of No. **Ten** before dinner and at bedtime with the No. **Seventeen**. Should there be an attack of piles, the tumors becoming swelled, painful and tender, the SPECIFICS No. **One** and No. **Seventeen** should be given in alternation, each dissolved in water, six pellets in a large spoonful, and administered every one or two hours until relief is afforded, then go on with the No. **Seventeen** for a permanent cure. Should there be bleeding of internal piles, the above will be proper and promptly efficient treatment.

For an application to the part, during an attack of piles the MARVEL OF HEALING is the best, that can be made; simply saturate a cloth of suitable size with the MARVEL and apply it to the part, and keep it in place by means of a T-bandage (that is a belt around the loins just above the hips, to which a band is attached at the back and brought up between the thighs and fastened to the belt forward). The cloth saturated in the MARVEL may be removed from time to time as it gets hot or dry, and the part thus kept saturated with the MARVEL. The MARVEL is best, but an application of cold water is frequently beneficial. When the piles are external, or can be readily reached, HUMPHREYS' WITCH HAZEL OIL applied night and morning, or injected, if they are far up, is the sovereign remedy, and has cured thousands of the most inveterate cases. Simply apply the oil with the end of the finger say three times per day and take in chronic cases the SPECIFIC No. **Seventeen**

four times per day, six pellets at a dose and the disease will soon show an improvement which with good habits may be continued to the point of cure.

### PROLAPSUS ANI.—(*Falling of the bowel*).

DEFINITION.—A protrusion of the mucous lining of the rectum through the anal orifice, after the action of the bowel.

This affection is not uncommon in children, and is occasionally met with in adults. It is generally the result of straining while at stool, in connection with a weakness or relaxed condition of the sphincter of the rectum. Sometimes the parts are protruded several inches, and in other cases but slightly, and readily return of themselves. When the protrusion does not return of itself, as is sometimes the case in children, the child should be laid upon its side, and the part gently pressed upon with the hand which has been oiled, or with a cloth wet in cold water, or oil or soft lard; and the pressure continued gently until the part has been returned to its place.

In severe cases, the protrusion takes place from walking, riding, or even too long standing, and can only be replaced with difficulty.

To prevent a recurrence of the prolapsus, the SPECIFIC No. **Ten**, six pellets at night, and the No. **Thirty-Five**, six pellets each morning, will be the proper remedies. The same treatment is proper for chronic tendency to prolapsus. If the prolapsus occurs in the course of diarrhœa, the cure of the diarrhœa will also arrest the prolapsus.

### LIVER COMPLAINT.

This disease may be divided into the acute and chronic forms, the latter, however, is generally known by the name

of liver complaint, although a careful examination of the disease, will many times reveal the fact, that the real disease is rather in the stomach and bowels than the liver. In some cases the liver itself may have become implicated, and may become properly the subject of treatment. Consult *Chronic Inflammation of the Liver*.

### HEPATITIS.—(*Acute Inflammation of the Liver*).

This disease is more common in the Southern States of the Union and in tropical climates, than in the Northern or Middle States. In the Southern States, the use of fat and heavy food, exposures to heavy dews or damps in the evening, and the powerful rays of the sun by day, are among its most frequent exciting causes. It may also be caused by violent mental emotions, the use of stimulants or ardent spirits, suddenly suppressed evacuations, violent emetics or purgatives, the abuse of mercury, gall-stones, external lesions, or even injury of the brain.

The symptoms differ according to the seat of the inflammation. When the *outer or convex surface* of the liver is inflamed, the symptoms closely resemble those of pleurisy; there is usually a violent burning pain in the right hypochondrium or liver region, sometimes resembling stitches, at others burning, shooting to the breast-bone, the shoulder-blade, or the point of the shoulder, or the right arm; sensation of numbness or tingling in the arm of that side, the pain increased by inspiration; a dry, short cough, and symptoms of acute fever; bowels irregular, generally constipated, and stools in most cases of an unnatural color. In this form of the disease, the patient can only lie on the left side. When the seat of the inflammation is upon the *inner or concave surface* of the liver, the pain is much less, and the patient complains rather of a sensation of pressure than of actual pain, but the entire biliary system is much more

involved. The eyes and face become yellow, as in case of jaundice; the urine is orange-colored, the evacuations mostly hard, and generally of a whitish or clay color. We also find bitter taste in the mouth, vomiting and distress in the region of the liver. The patient can only lie on the right side. The fever is usually high also.

Inflammation of the liver, unless properly treated, is liable to assume a chronic form, and may also terminate in suppuration, and the matter may burrow into the lungs or the intestinal tract; or may form a vomica or point and discharge externally; or it may form indurations or other alterations of structure in the liver, or may result in the formation of adhesions.

TREATMENT.—The SPECIFIC No. **One** is the proper remedy from the first, and should be continued either alone or in alteration with some other Specific, until the disease is subdued. Dissolve twelve pellets in six spoonfuls of water, and of this give a large spoonful every hour for the first twenty-four or forty-eight hours, or until the fever is mostly subdued, and pain and distress relieved. Then prepare the SPECIFIC No. **Ten** in the same manner, and give the two medicines in alternation, at intervals of two hours, until the disease is subdued and convalescence established.

The diet should be the same as in fevers or other inflammations: toast-water, thin gruel of corn-meal or oat-meal, milk-toast or light meat-soups, according to the stage of the disease.

### LIVER COMPLAINT—CHRONIC INFLAMMATION OF THE LIVER—ENLARGEMENT OF THE LIVER.

There are numerous morbid conditions of the liver which are popularly known as liver complaint, such as, enlargement, softening, abscesses, adhesion with adjacent organs, or other results of acute inflammation. What passes as

dyspepsia, is often some morbid condition or degeneration of the liver.

The symptoms of chronic inflammation of the liver are essentially those of acute inflammation, with the distinction of their duration, and their being less clearly expressed and their slower progress; and fever also only comes on after the disease has made considerable progress. The usual symptoms are as follows: Weight in the stomach after eating, flatulence, cramp of the stomach, acid eructuations, nausea, sometimes bilious vomiting, loss of appetite or canine hunger, thirst, whitish dry tongue, bitter taste, feeling of heat, heaviness, fullness or dull pain in the region of the liver and epigastrium, and tenderness of these regions on pressure; sometimes the pain is wanting or comes at irregular intervals, or is increased by exercise or filling the stomach; often sympathetic pains in the right shoulder, wandering pains in the limbs, alternating with those in the liver region; feeling of numbness or of paralysis in the lower extremities. There is often distention of the liver region; protrusion of the liver down below the false ribs, especially in a sitting or upright position of the body; difficult lying on the left or on either side; constipation, feces hard, without bile, clay or putty-like; sometimes diarrhoea, dark-mixed like tea-grounds, or flocculent stools; not unfrequently, vomiting of dark, adhesive, coagulated blood. The urine is thick, yellowish, oily, or scant, with thick sediment; often dry, hollow cough, with inability to take a deep inspiration; yellow or an earthy pale complexion, but in some cases there is not a trace of jaundice present. Usually there is mental depression and despondency, unquiet sleep or sleeplessness. In the latter stages the pulse, which up to this period had been slower than in the normal condition, becomes feverish towards evening. The disease often makes but slow progress, continuing for years, with frequent pauses at irregular intervals.

**TREATMENT.**—The SPECIFIC No. **Ten** is generally the best remedy, and may be taken in portions of six pellets, dry on the tongue, before each meal and on going to rest at night. Should there be at any time heat, fever or swelling, or tenderness of the region of the liver, the SPECIFIC No. **One** should be administered in fluid form, six pellets every two hours, as directed for acute inflammation of this organ. Aside from this, the use of SPECIFIC No. **Ten** should be relied upon for a permanent cure of this disease. Diet as for DYSPEPSIA.

### ICTERUS.—(*Jaundice*).

This disease is well known, and may occur to persons at all ages of life. It may continue for weeks, or even months, and there are some who are quite subject to such attacks. The disease generally commences with some form of indigestion, such as: Loss of appetite, somnolence, constant drowsy, full feeling, giddiness or swimming of the head, flatulence, nausea, vomiting, and there is some degree of tension or sense of pressure in the region of the liver. Gradually the face and skin, and especially the whites of the eyes become yellow, and in some cases the skin becomes dark-brown, or even black, giving rise to the appellation of "black jaundice;" the urine becomes orange-colored, and the feces whitish, clay, or putty-like, and there may be pain in the region of the liver. There is also frequently a very disagreeable tingling of the skin. It is likewise attended with more or less depression of spirits and loss of strength. In general there is but little fever, but in severe cases there may be an unusual amount of fever, with a tendency to the brain, producing a sort of stupid sleep, from which the patient is aroused with difficulty. This condition may be considered dangerous, as a fatal result may follow from oppression of the cerebral organs.



CAUSES.—Jaundice may be produced: 1. By some impediment to the flow of bile into the duodenum, and the consequent absorption of the retained bile; and 2. by defective secretion on the part of the liver, so that the constituents of the bile are not separated from the blood. Pressure of the enlarged womb in pregnancy, or the growth of tumors, causing obstruction of the gall-ducts, are also occasional causes. But *sedentary occupations, mental anxiety, and high living*, are probably the most frequent.

GALL-STONES.—A not uncommon impediment to the flow of bile is the impaction of a *gall-stone* in the natural channels of the bile. A gall-stone consists of bile in a crystalline form, the solvent properties having been released. The pain attending the passage of gall-stones is very severe; comes on suddenly, with paroxysm, often accompanied by vomiting, hiccough, etc.; is constant for a time, and terminates suddenly, and is thus distinguished from *Colic*, and by the pains being of a more local character, and in the site of the gall-duct.

When the disease has been caused from some unusual emotion, it may come on very suddenly, but in general it comes on in a very gradual, and not unfrequently, unobserved manner. It may be caused by acute or chronic inflammation of the liver; or from diseases of the stomach, or other portions of the intestinal track; blows upon the head, or in the region of the liver, may produce the disease; also moral emotions, or violent fits of passion; the inordinate use of chamomile tea, quinine, rhubarb, calomel, or mercury, may also be mentioned as causes, as these agents often tend to obstruct the biliary duct.

TREATMENT.—The SPECIFICS No. **One** and No. **Ten** are the proper remedies. In slight cases, six pellets of No. **One** each morning, and six pellets of No. **Ten** before each meal and at night will be sufficient. Should the disease be more decided and well marked, and the patient have some

degree of fever, the two remedies mentioned may be taken in alternation, six pellets every two hours until amendment occurs, and then at somewhat longer intervals

The diet should be of easily-digested food, free from condiments or stimulants of any kind, and may consist chiefly of chicken or veal soup, with stale bread, tapioca, sago or rice, and gruels made of arrow-root, corn-starch or farina. The drink should be principally water, and all stimulating or tonic bitters made of cider, barks, or wine, should be avoided, and especially all indigestible food, such as eggs, butter, fat-meats, milk, etc.

ACCESSORY MEANS.—Flannel squeezed after immersion in hot water, or a hot hip-bath, relieves pain. Jaundice from inactivity and chronic congestion of the liver requires change of air and scene, travelling, *daily walking*, or *horse-exercise*, regular and temperate habits, and the use of the abdominal compress.

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# DISEASES OF THE URINARY SYSTEM.

## ALBUMINURIA.

This is defined as a morbid condition of the urine, symptomatic of renal disease, but not always a result of it; and manifested by the presence of albumen.

Albuminuria is not Bright's disease. But it is always associated with it, and it may exist prior to and independently of any renal disease. If there is neither blood or pus in the urine, and nevertheless it is coagulable in even a slight degree, thus indicating the presence of albumen, it does not follow that there is any structural change in the substance of the kidney. It may be a symptom of several diseases or conditions and may even be a consequence of cold bathing. It may occur in febrile or inflammatory diseases; dyspepsia; excessive albuminous diet, as eggs; prolonged or very frequent cold bathing, by repressing the cutaneous secretion increases the blood pressure of internal organs, and so may produce degeneration in the structure of the kidneys. Occasional bathers are more likely to suffer than active swimmers. The symptoms are, that the quantity, color and density of the urine is natural, and yet it coagulates by heat or nitric acid.

TREATMENT.—When associated with inflammatory disease or cold bathing, give SPECIFIC No. **One**, six pellets before meals and at bed time. If from dyspepsia use SPECIFIC No. **Ten** in the same manner. If chronic the SPECIFIC No. **Twenty-Seven** at the same intervals and doses will be found effective

### NEPHRITIS.—(*Inflammation of the Kidneys*).

This disease is known by a pungent aching pain in the small of the back, on one side, generally the left, alongside of the spine, in the region of the kidneys. The pain is constant, and but slightly increased by contact or pressure, extending forward and downward along the course of the ureter. The secretion of urine is diminished when only one kidney is affected, and even entirely arrested in those rare cases where both are involved. There is frequent urging to urination, pain in the urethra, especially at the neck of the bladder during urination, sometimes even cramps of the bladder, and hence difficulty in voiding it. The urine is dark red, and often shows traces of blood. Not unfrequently the bladder becomes involved, and occasions a permanent constrictive pain in that region, which is increased by contact or pressure over the part. There is likewise nausea or even actual vomiting; sharp, decided fever, usually commencing with a severe chill, followed by heat; dry, hot skin; coated tongue; extreme thirst; full, hard, tense pulse.

The disease is rather rare, but it may arise in consequence of gout, or renal calculi, or be occasioned by a fall, or injury in the kidney region; or by suppression of the hemorrhoidal or menstrual flow; or by the use of certain medicines, such as squills, cantharides, turpentine, etc.

**TREATMENT.**—If there is considerable fever, the treatment may commence with the SPECIFIC No. **One**, of which six pellets may be dissolved in water and given every half-hour for three or four hours. Then the SPECIFIC No. **Thirty** may be given in alternation with it at the same intervals. Dissolve twelve pellets of each of No. **One** and of No. **Thirty**, in six spoonful of water, in separate glasses, and of these give every hour a spoonful in alternation, until the fever has abated; then substitute the No. **Twenty-Seven**

for the No. **One**, and so continue these two (No. **Twenty-Seven** and No. **Thirty**) in alternation, at increasing intervals as the disease improves, until convalescence is established. The diet should be the same as in fevers or inflammation; only light soups, gruels, toast, etc., and wine, malt-liquor or other stimulants should be strictly avoided.

### BRIGHT'S DISEASE OF THE KIDNEY.

This disease has become better understood of late years, and has attracted much attention from its persistent character and the number of its victims. It has several forms, which may be included in an inflammation of one or both kidneys producing a morbid condition of the gland and its secretions.

The symptoms of ACUTE NEPHRITIS, or ACUTE BRIGHT'S KIDNEY are: Anasarca of the upper as well as the lower parts of the body; the face, hands, as well as the feet are puffy and swollen; febrile symptoms; a dry, harsh skin; quick, hard pulse; thirst; and often sickness from sympathy with the stomach or kidneys. The skin is tense with infiltration of serous fluid through the subcutaneous areolar tissue, but is not doughy, does not pit. Frequent passage of urine, which is scanty, high colored, or smoky looking, albuminous and of high specific gravity. Examined by the microscope, blood corpuscles may be seen in it, and granular casts of the minute tubes of the kidneys, the kidneys themselves being in an active state of congestion if not of inflammation. Tested by heat or nitric acid the urine will deposit albumen. This condition has been called desquamative nephritis, from the rapid separation of epithelium which goes on. These renal symptoms are sometimes complicated with pleurisy, pericarditis, or peritonitis. It is frequently the effect of fever, especially *scarlet fever*

generally coming on in its later stages; exposure to wet and cold; action of irritating drugs, alcohol, etc.

**TREATMENT.**—The SPECIFICS No. **One** and No. **Thirty** will generally be found effective. Dissolve twelve pellets of each in six spoonfuls of water in separate glasses, of which give a spoonful once in three or four hours, alternately, according to the urgency of the case. Give the patient a milk diet, and mostly vegetable food.

### CHRONIC NEPHRITIS. BRIGHT'S KIDNEY.

**SYMPTOMS.**—Debility, general impairment of health, and pallor of the surface, coming on insidiously with pain in the loins and frequent desire to pass water, particularly at night, the quantity at first being increased. The patient's face becomes pallid, pasty, and cedematous or puffy, so that the features are flattened; and there is loss of appetite, acid eructations, nausea, and frequent sickness, which nothing in his diet will account for. The urine will be found to be of less specific gravity than natural; it is also albuminous and coagulates by heat or nitric acid. There is most albumen in the beginning of the disease, as the kidneys are then more congested, and towards the last it is heavier and may go down to 1.004, and the quantity becomes very small. At first, the urine may be very dark or smoky color, from containing blood corpuscles; but it afterwards becomes paler. The kidney itself becomes large and white.

The disease progresses slowly; but sooner or later there is *anemia* in consequence of the blood losing its albumen, and so is incapable of producing or maintaining the floating cells characteristic of healthy blood. *Œdema* of the feet and ankles is present; and, in advanced stages, there may be ascites or general dropsy. But dropsy is not invariably a marked symptom of this disease, and in some cases is scarcely observed. Death arises from *uræmia*, an accumu-



lation of urine in the blood, from the kidneys being unable to excrete it. Urea acts as a poison to the brain, producing delirium, convulsion and coma, of which latter the patient dies. Sometimes from the uræmic poisoning of the blood, inflammation of a serous membrane arises, especially pericarditis or endocarditis, inducing valvular disease of the heart, and then the patient becomes extremely dropsical and is carried off by asphyxia from complication of heart and kidney disease.

Chronic nephritis often follows acute nephritis; or it may result from bad living, intemperance, constant exposure to wet, struma, gout. Painters, plumbers, and workers in lead are very liable to the disease. Both kidneys are usually affected, probably from defective assimilation or some change of nutrition.

TREATMENT.—The Specifics most appropriate in the more chronic form of this disease are the No. **Twenty-Seven** and the No. **Thirty**. They may usually be given in doses of six pellets and repeated one dose every three or four hours, in alternation, and will be more effective if each is given dissolved in a spoonful of water. Should the dropsy be extreme, the SPECIFIC No. **Twenty-Five** may be substituted for No. **Thirty** with advantage, and thus the No. **Twenty-Five** and No. **Twenty-Seven** be given in alternation. When patients are yet about and able to attend to their business the medicines may be taken dry, six pellets at a dose and repeated four times per day.

DIET AND ACCESSORY MEANS.—Brilliant results have been obtained by an exclusively milk diet, when other treatment has failed; an adult sometimes taking as much as a gallon in twenty-four hours. It may be taken cold or tepid and from half a pint to a pint at a time. A vegetable diet is likewise recommended. Warm baths and vapour baths are beneficial in lessening the dropsy and promoting the healthy function of the skin. If there should be much

anemia, warm baths should be used with discretion. Warm clothing, woollen garments, favor the free action of the skin; and chills and cold draughts should be guarded against. By such means and the action of appropriate specifics patients suffering from chronic kidney disease may be spared in reasonable health for many years, enjoying the pleasures and fulfilling the duties of life.

### CYSTITIS.—(*Inflammation of the Bladder*).

This disease is not very common in its more severe forms, but in its slighter manifestations, is not unfrequently met with. It may be occasioned by the abuse of *cantharides* or other deleterious drugs, or from suppressed piles, or the menstrual flow. Also, blows or injuries, or the immoderate use of alcoholic stimulants may excite its appearance. The acute form is known by pain and sense of weight in the bladder; also by tension, heat and swelling externally in that region; severe pains when the region of the bladder is pressed upon or even touched; frequent and painful discharge of urine, or suppressed, scanty discharge, or frequent, painful or even ineffectual efforts to pass the urine; fever, rigors, and vomiting are common. When the neck of the bladder is principally involved, the spasms may be so great that the urine is only passed in drops under the most powerful straining, and the bladder becomes distended and mounts like a hard painful ball over the public bone in front; if the lower or posterior portion is principally involved, the pain is increased by pressure on the perinaeum. The urine is hot, reddish or high colored, but in some cases quite pale; and sometimes there may be a discharge of mucus or pus tinged with blood. It is rare among young people, and mostly a disease of advanced life.

TREATMENT.—When there is fever, the SPECIFIC No. **One** may be given in alternation with No. **Thirty**, but in gen-

eral the latter Specific will be found sufficient alone. Dissolve twelve pellets of No. **Thirty** in six large spoonfuls of water, and of these give one every half hour if the pain, straining, and distress is very great. But if there is considerable fever, prepare the SPECIFIC No. **One** in the same manner, and give the two in alternation at intervals of half an hour at first, and gradually increase the intervals to an hour or two hours, as the disease yields. Hot fomentations to the parts may be of service, should the painful urging and tenesmus be severe.

CHRONIC CYSTITIS is more common; and may be the sequel to an acute attack; or may be caused by calculi, disease of the prostate gland, stricture, etc.; but the most common cause is *inability of the bladder to empty itself*, either from loss of muscular power of its coats, or prostatic enlargement. The decomposing urine then becomes a source of irritation to the mucous lining of the bladder; the urea is soon decomposed into carbonate of ammonia, and this salt is acrid and irritating, and the bladder in time acquires a condition which has been aptly compared to that of a badly-washed utensil. The symptoms are the same as described under the acute form, though to a modified extent; but while the pain is less, the discharge is generally greater. The mucus is often very abundant, a pint or more being often passed in a day, and it becomes very tenacious on standing, so that when a vessel containing the urine of such a patient is emptied, an abundance of ropy mucus follows the urine in a mass.

Cystitis may be distinguished from *Inflammation of the kidneys*, thus in the former the pain travels *upwards*, towards the loins; while in the latter the pain extends from the loins *down* to the bladder.

TREATMENT.—To allay the chronic irritability of the bladder, and restore, if possible, the organ to its natural condition, the SPECIFICS No. **Twenty-Seven** and No.

**Thirty** are the proper remedies, and of these six pellets should be taken, in alternation, morning and at night, or even four times per day, taking of No. **Thirty** six pellets each morning before breakfast, and afternoon before supper, and of No. **Twenty-Seven**, each noon before dinner; and at night upon going to rest.

For an attack of painful or difficult urination, the SPECIFIC No. **Thirty** should be given in fluid, twelve pellets in six spoonful of water, and of these let one spoonful be given every half hour, or hour, until the pain and spasm has abated and the urine passes freely. Then return again to the No. **Twenty-Seven** and No. **Thirty** for the treatment of the chronic disorder. The SPECIFIC No. **Ten** may often in such cases prove exceedingly beneficial, either alone or in alternation with No. **Thirty**.

ACCESSORY MEASURES.—For the relief of pain, hot fomentations; and in acute cases, rest in the horizontal posture. The warm hip-bath, the abdominal compress, and mucilaginous drinks, favor recovery.

## CATARRH OF THE BLADDER.

Old chronic irritations and frequent inflammation of the bladder, are apt to result in a chronic irritation and thickening of the mucus membrane of the bladder, urethra and surrounding organs. This results in *frequent desire to urinate*; the fluid is forcibly or spasmodically ejected in small quantities, and the passage is attended with aching, burning or spasmodic pain, (strangury). The pain may be confined to the bladder or extends to the end of the penis, round the pelvis or down the thighs. The urine may or may not be unnatural; but when the disease has become chronic, mucus or pus is passed with it, thus constituting what is called *Catarrh of the Bladder*. Healthy persons urinate on an average five or six times in the twenty-four

hours, but when there is inflammation or a degree of irritation, a slight distention is painful and the calls are more frequent.

TREATMENT.—The SPECIFICS No. **Twenty-Seven** and No. **Thirty** are the appropriate remedies, and may be taken in ordinary cases four times per day. The No. **Thirty** each morning and afternoon, and the No. **Twenty-Seven** at noon and at bed time, six pellets at a time. If urgent, the medicines may be taken one dose every three hours. This treatment has relieved thousands of the most inveterate cases.

#### CALCULUS.—(*Stone*,—*Gravel*).

In the urine, are washed away refuse matters arising from digestion, assimilation and the wear and tear of the body. Any departure therefore, from the healthy process of digestion and nutrition is sure to be followed by a departure from the natural properties of the urine. A deposit may exist occasionally in small quantity unnoticed; it is the constant or abundant presence which furnishes important evidence of disease; but a frequent sediment\* should never be disregarded.

The most common varieties of calculus are, the *lithic* deposit (observed in fever, chronic liver-disease, etc., forming pink or brick-dust-like coloring-matter in the urine). When abundant, as in more advanced stages, it is commonly called *red-gravel*, and chiefly occurs in robust persons of florid appearance, who live high and suffer from irritable gastric

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\* DEFINITION.—A precipitate settling from the urine after it has been voided, it is called a *sediment*; when formed in the bladder or kidneys, it is called *gravel*, the urine being muddy as it passes; and when gravel, lodging in any of the urinary passages, becomes concrete, it is called *stone*. When the urine of a person habitually presents any one kind of deposit, he is generally said to have a corresponding *diathesis*; as the lithic diathesis, etc.



dyspepsia; and sometimes are associated with rheumatism and chronic skin diseases, but most frequently with gout; the uric acid condition often alternates in the same individuals with gout; even in generations this may be observed, gout manifesting itself in one, gravel in the second, and gout again in the third. This is the most common variety, and may occur at any age. The *phosphatic*, usually depends (unless arising from changes in the bladder) on atonic Dyspepsia, and an anæmic or broken-down state of the constitution, and occurs chiefly in the aged; the *oxalic*, which evidences feeble powers of assimilation, and exhaustion of the nervous system, from over-work, anxiety, or venereal excesses. The patient is usually pale and hypochondriacal, suffers from disturbed sleep, acidity, etc. There is no gravel or sediment, properly speaking; the particles of oxalate float as crystals in the urine, or subside if it be allowed to stand, but are not in large quantity.

In the adult male, stone is most common between the ages of fifty and seventy, or, perhaps, between the ages of fifty-five and seventy-five; and it has a history something like the following:—A calculus, in eighteen or nineteen cases out of twenty, has *uric acid* for its basis, the uric acid or gouty tendency (for the diseases are identical) being hereditary; and the first symptoms are frequent deposits of pinkish matter in the urine on cooling, resembling minute particles of cayenne pepper, which are first formed in the kidneys. When a patient habitually or frequently passes urine which yields a pinkish deposit on cooling, and which cannot be traced to cold weather, errors in diet, or other accidental causes, he has what is called the *uric acid diathesis*. Afterwards, these cayenne-pepper-like particles become aggregated, forming little calculi, popularly known as “sand” or “gravel;” then, again, these tend in time to become larger, often as large as peas, or even beans. During the descent of the calculus from the kidney to the



bladder, the patient complains of severe pain in the back, hip, groin, and testicle, and great discomfort. In a day or two, or earlier, it is usually voided with the urine, and thus the matter is disposed of. But when the bladder is unable to expel the calculus by its natural efforts, the calculus increases in size, by deposit on its surface, and in time a stone is formed that cannot be removed except by an operation. Some are smooth and roundish, others rough and ragged, and irregular, or like scales; more commonly, brown or of reddish chocolate color, or of amber color, or chalk-like, etc.

**SYMPTOMS.**—There are four very conclusive symptoms:

1. *Increased frequency of passing water*, chiefly during the day, and when moving about, riding on horseback, and less so at night and when at rest.
2. *Pain in the glans penis during and immediately after micturation*, and a continuous desire to pass water for a few minutes until fresh urine trickles down and separates the stone from the lining of the neck of the bladder, which is a highly sensitive part. As soon as sufficient urine collects, relief is experienced. Pain at the end of the penis is highly diagnostic of stone in the bladder. *Pain low down in the abdomen* is generally due to chronic inflammation of the bladder. *Pain before urinating* is generally caused by a sensitive or inflamed mucous membrane.
3. *The urine contains muco-pus*, such as is found in cystitis, only to a greater amount. With calculus the urine is almost invariably clouded by mucus or pus.\*
4. *Blood is passed from time to time*, and the quantity

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\* It is important to discriminate between urine clouded by mucus or pus, and urine clouded by deposited salts. In cold weather the urine, on cooling, readily deposits its lithates, where none would be seen in hot weather. On the application of heat it becomes quite clear, which is never the case if the thickness be caused by pus or mucus. Occasional thickness of urine from lithates is of no great importance. But if the deposit be constant and heavy, habits must be corrected, diet restricted, and indigestion removed. If the urine does not become clear with heat, an organic compound is the cause of the thickness, and the source of it must be investigated.

is *increased* by much *exercise*, such as riding in a springless carriage, or over a rough road, on horseback, much walking, and by all rapid movements of the body. But if the patient remain quiet no blood at all may be passed, or a mere drop or two, with pain in the last expulsive effort at urination. Generally the urine has a florid tint, while blood passed from the kidneys gives the urine a brownish color from long contact of the urine with the blood. The same remark applies to hæmorrhage due to enlarged prostate. The four symptoms occurring simultaneously, unmistakably indicate stone in the bladder. But, if additional evidence be desired, there are the *chemical tests of the urine*, and the *sound*, an instrument, bent a little shorter than the ordinary catheter, by means of which nearly every portion of the bladder can be explored.

PREVENTION OF CALCULUS DISEASE.—Cider has a beneficial influence on those who possess a lithic diathesis. Milk, however, has the reputation of being the great anti-lithic.

The classes of food which it is especially necessary to restrict are: 1. *sugar*, in whatever form or combination this substance is presented; 2. *fatty matters*—butter, cream, and fat meat—whether simply cooked, or in the form of pastry; 3. *alcohol*, especially in the form of sherry, port, and the stronger wines; tea and coffee; also strong beer, champagne, etc. Abstinence from these substances is recommended on the ground that the labor of the liver will be thus greatly lightened, and correspondingly the vicarious work of the kidneys will be diminished. *Filtered rain*, or *soft* or *distilled water*, has a very great solvent power, and may be taken to the extent of two or three pints daily. Further, a fair amount of open-air exercise daily, and the promotion of the healthy functions of the skin by bathing, frictions, and suitable clothing, as directed in the first part of this Mentor.

TREATMENT OF THE DIATHESIS.—Patients having a predisposition to the formation of stone, especially if they have

passed calculi with their urine, require *medical* treatment and careful supervision to correct the tendency; for although useless to remove a stone of size, remedies aid in the expulsion of sand or gravel; and also correct the tendency to such formations. Under our treatment many patients who formerly passed small calculi have entirely ceased to do so.

First and foremost, all avoidable causes must be removed—high living, the use of alcoholic liquors, and insufficient exercise, on the one hand; and over-work, anxiety, and excesses of all kinds, on the other. Dyspeptic symptoms should be met by such means as are pointed out in the section on dyspepsia; and any other concurrent disorders should be corrected. Removal to a locality where *pure soft water* can be procured is often alone curative.

All cases in which there is even room for a suspicion of stone, should be at once placed under good Homeopathic treatment.

**TREATMENT.**—*For an attack of gravel or renal calculi, attended with pain as before mentioned, frequent desire to urinate, etc., give the SPECIFIC No. **Thirty**, twelve globules in six spoonfuls of water, of which give a spoonful every half hour. Give the patient a hot foot or sitz bath, or apply hot fomentations over the side of the abdomen where the pain is; or give large injections of warm water so as to relax the system and arrest the spasm, and so facilitate the passage of the gravel.*

*To prevent the formation of the calculi, take of the SPECIFIC No. **Thirty**, six pellets at night, and of the No. **Twenty-Seven**, six pellets each morning, and so continue for months.*

Persons afflicted with this disease should subsist as far as possible upon farinaceous food and mucilaginous drinks, in preference to the more heavy and heating meats.

**STRANGUARY.**—(*Difficult, painful, or suppressed urination*).

We group together these various conditions of morbid urination, as they frequently arise from the same causes, run into each other in the progress of the complaint, and generally require the same remedies.

*When the urine is retained*, while the kidneys continue to secrete the fluid, the bladder becomes after a few hours so filled and distended, that it rises like a large ball or swelling, immediately over the pubes, which may be perceptible to the touch. The lower portion of the abdomen also becomes swelled and sensitive to pressure. There is some fever, and the inclination to pass water is frequent and urgent, though ineffectual. Should this condition continue any great length of time, inflammation and subsequent mortification may ensue, or the bladder become ruptured with fatal result.

Retention may be caused by inflammation of the urethra, or from stricture, or it may result from suppressed piles. Going too long without urinating, and hence over-distention of the bladder may in some cases close the internal orifice of the organ; or it may be occasioned by spasm of the neck of the bladder. Paralysis or inflammation of the neck of the bladder may also produce it. Also tumors in the neck of the bladder, or calculus or swelling of the prostate gland.

*Difficulty of discharging the urine* is manifested by frequent desire to urinate, attended with heat, smarting pain, uneasiness and a sense of distention and fullness in the region of the bladder. The urine is only voided in drops or small quantities, sometimes mixed with blood, after great urging or straining.

This condition may be occasioned by gonorrhœa or inflammation of the urethra, spasm of the neck of the bladder, excesses in drinking, exposure to cold in sensitive subjects, suppression of some habitual discharge, presence of gravel

in the neck of the bladder or urethra, or from the application of cantharides in the form of a blister.

In some rare cases the secretion of urine may be *suppressed*, the kidneys failing to elaborate this secretion from the blood. It mostly occurs in persons of advanced age, or in very young children. It may occur in the course of fevers or in dropsy, or inflammation of some organ of the body. Gouty subjects, particularly after being exposed to cold or wet, or on the suppression of some accustomed discharge, such as hemorrhoids, are most liable to it. Generally there is no inclination to make water, there being no accumulation; and there is no swelling or enlargement in the region of the bladder, indicating an accumulation. Other symptoms are: Nausea, sense of weakness and sinking at the præcordia, sometimes there is also frequent turns of vomiting, severe hiccough, pain in the back, intense headache and restlessness. The skin generally presents a normal condition, but profuse perspiration sometimes supervenes, in some cases with a decided urinous odor. If the secretion is not again established, the system soon suffers, the blood is not purified, and cerebral symptoms declare themselves, and life terminates in coma.

**TREATMENT.**—When there is retention of urine, frequent effort, and but little or no discharge, the SPECIFIC No. **Thirty** should be given dissolved in water, six pellets in a spoonful, and repeated every hour, or even every half hour in urgent cases. Hot fomentations applied to the region of the bladder, and warm seat-baths, are also very efficient auxiliaries.

*Painful, difficult urination* requires nearly the same treatment, only there is less necessity for seat-baths or warm fomentations. The SPECIFICS No. **Thirty** may be taken, six pellets dry on the tongue and repeated every two hours, will be sufficient in most cases. Should there be calculus, tumors, or other mechanical obstructions in the neck of the



bladder or urethra, the case will be more obstinate, yet the use of the medicine and warm fomentations will be proper, and generally efficient. If there is inflammation of the urethra, the same treatment as in gonorrhoea must be pursued.

When the secretion of the kidneys appears *scanty* or *suppressed*, a few portions of the SPECIFIC No. **Eleven**, either alone or in alternation with No. **Thirty**, at intervals of two or three hours, will be probably sufficient to restore the secretion again.

#### ENURESIS.—(*Urinary Incontinence—Wetting the bed*).

This difficulty is manifested in a frequent desire to pass off the water, and an inability to retain it for any length of time after the inclination comes on. Sometimes the call comes on every hour, or even more frequently during the day, and the urgency is very pressing. It may arise from weakness or relaxation of the neck of the bladder, or from the urine being too acrid or irritating, or from the presence of gravel, or some diseased condition of the bladder itself.

A frequent phase of this disease manifests itself in the involuntary discharge of the urine at night, or what is termed "wetting the bed." It is mostly noticed among children under ten or twelve years of age, but has occasionally been known to continue to adult age. Sometimes it appears in children apparently disconnected from any other morbid condition of the urinary organs; the child has perfect control while awake, but during the unconsciousness of sleep the system becomes relaxed and the urine is passed involuntarily. It may arise in some cases from the irritation of worms, or from the secretion being too acrid, but in general its foundation, especially in obstinate cases, will be found in scrofulous diathesis.

TREATMENT.—In all cases of frequent calls to urinate or



inability to retain the secretion, the SPECIFIC No. **Thirty**, three pellets for children three times per day, will be sufficient, and be found promptly curative.

When the disease may be supposed to arise from the irritation of worms, the SPECIFIC No. **Two** may be given in alternation with No. **Thirty**, each taken twice in the course of the day.

In obstinate cases of wetting the bed, the SPECIFICS No. **Twenty-Two** should be given, three pellets for children every morning on rising, and the No. **Thirty**, three pellets at night, and this course pursued until the cure is effected.

In the case of children subject to this infirmity, care should be taken not to let them drink of water or other fluid late in the evening, or on going to bed; not to permit them to eat apples, acid fruits, watermelons or cantelopes late in the afternoon or evening, and to use no kind of drink calculated to stimulate the urinary secretion; and also when children are subject to this infirmity, to have them urinate the last thing before retiring, and also very early in the morning, and on no account suffer them to lie in the wet clothes.

#### DIABETES.—(*Excessive Secretion of Urine*).

This disease is known as a constitutional cachexy, manifested by an excessive discharge of pale, heavy, and sugary urine, the sugar being formed in the system from the starch or saccharine matter in the food. There is a sense of sickness, debility, and progressive emaciation; red, fissured tongue, and enlarged papilla; intense thirst and frequent urination; voracious appetite and sinking of the stomach; bowels usually costive, and stool hard and dry; harsh and dry skin; the breath has a peculiar violet or chloroform-like smell; boils or carbuncles, or swellings of the legs are frequent attendants; the insatiable thirst is one of the most characteristic symptoms. The quantity of urine is usually

greatly in excess, amounting to from eight to twenty or more pints in the twenty-four hours. It is usually of a pale, straw color, has a faint smell of apple, hay, or milk, and is specifically heavy, according to the amount of sugar it contains. Diabetic urine may be tested in various ways: will ferment with the addition of yeast, or leave a residuum like molasses on evaporation.

There is another form of diabetes characterized by an excessive discharge of clear, colorless urine, but which is devoid of sugar. There is thirst, a harsh, dry skin, and mental and physical weakness present.

TREATMENT.—In diabetes the patient must avoid all forms of starch or sugar, and the foods containing them; but should live on other abundant nutritious food. Fat meat, fish, oysters, eggs, milk and soups thickened with finely powdered bran, but no bread, potatoes, grapes, pears, berries, melons, or other sweet, rich fruits. As a substitute for bread, bran ground fine and mixed with eggs and a little butter, and hard baked, may be used. The thirst may be gratified with water, which rather benefits than otherwise. The patient should also take five drops, four times per day, of a *special homeopathic* SPECIFIC FOR DIABETES, price \$2.00 per bottle, to be had of this Company, on application by mail. This treatment has been uniformly successful in many, even advanced cases. The patient may also drink freely of skim-milk. It may be made a regular diet and as much as seven or ten pints may be taken daily in fluid, or two or three pints of the amount may be made into curd daily and taken in that form.

#### HEMATURIA.—(*Hemorrhage with the urine*).

Occasionally the urine is found of a more or less deeply reddish tinge, and an examination shows the presence of blood. Sometimes quite a proportion of the discharge consists of blood, and at other times there is but a slight

admixture. It may arise from any cause that separates any of the minute blood vessels along its course. Thus, falls, blows, bruises, leaping, running, any violent exercise, or a lodgment of a stone in the kidney, urethra, or bladder, or an inflammation of the kidney may occasion it. Irregular menstruation, suppression of piles, excessive indulgence in spirituous drinks, venereal excesses, the use of asparagus or cantharides may at times induce it.

When the blood is discharged in streaks or dots, and deposits, on standing, a dark brown sediment like coffee grounds, it is likely to have come from the irritating effects of a stone in the bladder, and the act of urinating is attended with some straining and effort. If it proceeds from the kidneys, there will be pain in the lumbar region; anxiety; numbness along the inside of one or both thighs; drawing up of the testicles, and derangement of the bowels.

The presence of blood in the urine is always a serious matter, and should demand our attention. In most cases it is controllable, but should not be neglected.

TREATMENT.—The SPECIFIC No. **Thirty** will generally be found sufficient, and should always be tried first, six pellets dissolved in a spoonful of water, and given every two or three hours, gradually increasing the intervals.

Should the disease arise from the kidneys, and especially if there should be an appearance of pus or matter in the secretion, it will be better to alternate the SPECIFICS No. **Twenty-Seven** and No. **Thirty**, six pellets at a time, and say four times per day, continuing this course.

Drinking of cold water is objectionable, and tends to increase the irritation. Barley-water in large quantities is the best drink.

Should these remedies not control the disease, and especially if the amount of blood in the urine is quite copious, half a teaspoonful of the MARVEL OF HEALING, taken every one or two hours, will be effectual.

# DISEASES OF WOMEN.

## MENSTRUATION.

The sufferings attendant upon the various forms of disease to which women are particularly liable, comprise a large share of the evils to which they are subject. Much of the health and happiness of the sex depends upon the proper performance of the various functions incident to their peculiar systems. No considerable derangement in these functions can exist for any length of time, without drawing the entire system into sympathetic suffering. While this class of disease is so important, and exercise so grave an influence over the health and happiness of the female, yet their nature is such as to necessarily exclude them, to a great extent, from observation, and the victim often prefers to suffer the pain, distress and inconvenience of them, than to disclose them to her medical attendant. It is then especially important that ladies, and especially mothers, should make themselves acquainted with the subject, and as far as possible to be able to correct these disturbances in their earlier stages, and before they have become complicated or inveterate from lapse of time.

The first menses usually make their appearance in this climate at about the fifteenth year; in warm climates earlier, and in colder later. It is also subject to variations, depending upon the general health, vigor, and development of the person. For a year or two it may be scanty, and not

unfrequently subject to some irregularities, which need not excite apprehension, unless they are very grave or important. In healthy women it should appear every twenty-eight days, and flow four or five days, varying again according to the health and vigor of the person. About the forty-fifth year of life it generally ceases altogether, though in some cases it may commence with irregularities some years earlier; and in others the function may continue regularly until the fiftieth year, or even later. Its cessation is marked by irregularities and various disturbances of the system, extending for months, or even years. This cessation of the monthly-flows, and the disturbances of the period, are generally termed the “change of life” or the critical period.

AMENORRHEA.—(*Tardy menses—Delaying menses*). When the menses, in young girls, do not come on at the usual time, it is not always proper to hasten to administer medicine, with a view of forcing their appearance. It is a better rule, so long as the general health remains good, to do nothing to promote this secretion, beyond attention to the proper clothing, exercise, and diet of the patient. The clothing should be warm and changed to suit the temperature and season; and a wholesome, generous diet should be adopted, avoiding all spices, coffee, and high-seasoned food. Care should be likewise exercised that the child be not overtaxed by study, too long or too severe lessons, or sitting too long at the piano; while, from want of appetite, or unsuitable or too meagre diet, the system is insufficiently nourished during this period. These measures will generally be sufficient. Should they however fail, or should there be some symptoms of its approach, such as flushes of heat, frequent giddiness of the head, heaviness in the abdomen and about the loins; or if she is dull, stupid, melancholy or sad; or if she is bloated, sluggish; or even if very slender and feeble, the case should demand attention, and the

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patient should receive proper care in order to prevent after diseases, irregularity and suffering.

**TREATMENT.**—The SPECIFIC No. **Eleven**, six pellets night and morning, will be found sufficient, and may be continued regularly until the menses are established. Fresh air, moderate exercise, and simple, generous diet, are important. A sponge bath night and morning, avoiding exposure to night air and cold damp feet, are also important auxiliaries.

**CHLOROSIS.**—(*Green-Sickness*).—In some cases the menses fail to appear at the proper age, or appear imperfectly, very scanty in quantity, wanting in proper color, and irregularly as to time, or not at all, and, additionally, there are more or less of the following symptoms: Weariness, want of strength or vigor, languor, debility, the patient becomes emaciated, face pale, earthy, lips blanched, bloodless, or sometimes flushes of heat, depraved appetite, longing for sharp, acid, or cheering things, or for slate, chalk, or clay. The bowels are irregular, confined, or relaxed; abdomen often distended, with borborigmi or flatulence, especially after eating, or along in the latter part of the day; limbs frequently are swelled and cold; headache, short breath, and palpitation of the heart on slight exercise, and not unfrequently, short, dry cough. These symptoms in young girls are always of the utmost importance, and demand care and attention for their removal. Yet you should not rush to extreme means. A little time, patience and care, with the use of the proper medicines, will generally bring all around right, and give the patient a good, healthy constitution.

**TREATMENT.**—The SPECIFIC No. **Eleven**, six pellets in water, three times per day, will almost always be found sufficient; and especially if coupled with this, due care be exercised with regard to the diet and regimen of the patient. All that has been said under the previous section in regard to *Tardy Menstruation* obtains here. Good air,



generous diet, warm clothing, daily frictions of the body and bathing, are all means to establish and build up the general health, and most important and efficient auxiliaries in the work of restoration; and generally succeed in a few months in restoring the patient, and bringing her over this often-times critical period. Other medicines may be used as intercurrent remedies in the treatment, if the symptoms so require: as, the No. **Ten** for flatulence, feeble digestion and poor appetite; No. **Seven** for cough or hoarseness; No. **One** or No. **Thirty-Five** for flushes of heat or headache. These remedies may be given, one or two doses of six pellets per day, while the No. **Eleven** is given regularly night or morning.

SCANTY, INSUFFICIENT MENSES.—In some cases, after menstruation is established, the discharge does not appear at the proper time, there being five or six or more weeks between the intervals; or, it may continue only for a day or two, being pale or unusual in color, or stopping, and then coming on again for a few hours; or other features of irregularity, denoting an unhealthy or feeble menstrual flow. All such cases indicate either general debility, feebleness of the entire system, the presence of some serious disease or derangement of the uterine system, and demand attention. We should seek to build up the general health, by nourishing food, stimulants in rare cases, good air and healthful exercise, keeping the feet dry and warm, and the lower extremities well protected, and the mind cheerful and happy.

Beside these hygienic observances, the use of the SPECIFIC No. **Eleven**, six pellets night and morning, or even six pellets before each meal and on going to rest at night, will in general restore the system to its natural and healthy function.

SUPPRESSED MENSES.—Sometimes, in regularly menstruating women, the discharge becomes suppressed, and fails to

appear at the proper time. This is most commonly the result of cold, and especially of *damp cold*, and is a cause to which women should be constantly on their guard. Cold feet, getting the feet wet, insufficient covering for the feet, legs and lower abdomen, or a thorough chilling of the whole body about the time it should appear, or even during the flow, are sufficient to arrest the discharge, and result in very mischievous consequences. Sudden and powerful emotions of the mind, or grief and despondency, may also arrest it, and at times, these powerful influences applied during the intervals between the periods, may be sufficient to prevent its appearance. The use of acids, vinegar, pickles, or harsh, indigestible things, may have a similar effect. When these obstructing causes are applied during the flow, or just at the time of its being established, the consequences are much more severe and violent than when they are applied during the interval.

But when the obstructing causes are applied during the interval, a train of symptoms arise which are quite as serious, if not as sudden and violent. The patient becomes pale, languid, debilitated; her appetite fails, and she looks sickly and dejected; there is loss of energy and ambition; the feet and ankles often swell; she becomes nervous, palpitation of the heart, indigestion, flatulence, and shortness of breath appear, and very generally leucorrhœa comes on. In feeble persons predisposed to consumption or pulmonary disease, suppression is peculiarly prejudicial and always demands serious attention. The result is that: The flow may either cease suddenly, or it may not come on at all at the next period, or it may come on attended with scanty, irregular discharge, or with severe pain and distress. In the worst cases we have frightful attack of spasmodic pains in the bowels and stomach, often attended with retching, vomiting, headache, flushed face, delirium, convulsions, hysteria, palpitation of the heart, or difficult breathing, etc.

**TREATMENT.**—Dissolve at once twelve pellets of **SPECIFIC No. Eleven**, in six dessert spoonsful of water, and of this give one spoonful every hour, giving the patient also a hot foot-bath, and put her quietly and comfortably to bed if the case is sufficiently serious to justify it. This will generally suffice; if it does not, another dose may be prepared in the same manner, and taken at intervals of two or three hours, until the result is accomplished.

If the flow has been fully established, it may not be requisite to do anything in the interval. But if the result has been imperfectly accomplished, the **SPECIFIC No. Eleven** should be given, six pellets every two or three nights during the interval, and at the time it should again appear, care should be taken that there be no exposure or danger of a chill to prevent its appearance.

WHEN THE PROPER TIME RETURNS, and the menses do not appear, take six pellets of **SPECIFIC No. Eleven** every night on going to bed, and morning on rising, and bathe the feet in warm water ten or fifteen minutes, two or three nights in succession, if necessary. A single dose or two will, however, usually be found successful.

**DYSMENORRHEA.** — (*Painful Menstruation*).—Many women suffer an untold amount of *pain* at every return of the menstrual period; not only bearing down, but cuttings, gripings, colic, cramps, and, in some cases, even convulsions attend every access of menstruation. Often these sufferings are so excruciating as to embitter the life of the patient, and cause her to dread even the thought of a menstrual return; and the prostrating effects of one period are hardly recovered from, before another comes on. These sufferings are liable to occur during every period of life, from the commencement to the close of menstruation, and certain persons or constitutions are peculiarly predisposed to them. Exposure to cold and want of proper care during the first years of menstruation, are the common sources of this

suffering. The pain often begins some hours, or even days before the flow commences; and at other times the discharge commences and continues several hours, then diminishes or ceases entirely, with great suffering. The pains may continue an indefinite period, ceasing or becoming less when the flow has been established under proper treatment; or, they may continue during the entire period, without shortening the period, or diminishing the quantity. The pains may be of an intermitting, expulsive character, or a steady, aching pain in the loins, hips, and back, like those which usually precede menstruation. In some cases membranous shreds are expelled, and in others the flow is natural. Not unfrequently the breasts are swelled, sensitive, or even quite painful.

Such cases are sometimes found in connection with scanty, retarded, or irregular periods; and again, with regular or too abundant discharge, the feature being excessively violent pain, pressure, bearing down, and even cramps and convulsions at every access of the monthly period.

**TREATMENT.**—*During the interval* between the periods, give every night six pellets of the SPECIFIC No. **Eleven**. *When the pain comes on*, give six pellets of the SPECIFIC No. **Thirty-One**, every hour, until relief is obtained, or several hours have passed. If not fully relieved by this, give the SPECIFIC No. **Eleven**, in alternation with No. **Thirty-One**, and at the same intervals. In some cases where there is great bearing down, or when the discharge is quite profuse, the SPECIFIC No. **Thirty-Five** will be found very efficient, given in the same manner, either alone or in alternation with No. **Thirty-One**. This course will very generally relieve the most inveterate cases.

*For headache during the menses*, take the SPECIFIC No. **Eleven**, every two hours six pellets, until relieved. In some cases the SPECIFIC No. **Thirty-Two**, taken in the same manner, acts like a charm.

**METORRHAGIA.**—(*Too profuse, or too frequent menses*).—Often, especially in women subject to “the whites,” and dependent also upon a similar relaxed condition in the system, the menses are *too profuse*, returning again after a cessation of only ten, fourteen, or sixteen days, and flowing from five to ten days. Thus the discharge may not only be *too profuse*, but also *too soon* and *too frequent*, or it may only appear too soon, without being for the time excessive in quantity. Sometimes the secretion is scanty for some days, and then comes on like a flood, causing great prostration, faintness and debility, from which the patient has scarcely time to recover, before a new attack comes on. It may be attended with only slight pain or distress beyond the sensation of debility, consequent upon the great drain upon the system. But in other cases the pain, distress, or dragging down pains are very severe and exhausting. Sometimes, indeed, the discharge is so profuse as to merit the designation of real hemorrhage, or flooding, and, of course, induces a condition of great debility and prostration. Women subject to this difficulty, should entirely abstain from coffee, wine, or other stimulants, and also from all heating drinks, spices, or condiments. These excitements exert a direct influence in keeping up the irritation, and in promoting this unhealthy flow.

**TREATMENT.**—During the interval between the periods, the SPECIFIC No. **Twelve**, six pellets morning and night, should be taken, regulating the diet as above directed. After the flow has continued two or three days, and if desirable to arrest its further excess, commence the use of the SPECIFICS No. **Ten** and No. **Twelve** in alternation, giving six pellets at a time at intervals of three hours. If the discharge is very profuse from the first, the above two Specifics may be commenced earlier, and may be given every four hours in alternation. When the discharge lingers along for several days, six pellets



of No. **Ten**, given at night, will generally suffice to arrest it.

In case there be at any time an excessive flow, amounting to a dangerous hemorrhage, from whatever cause, ten or twelve pellets of SPECIFIC No. **Twelve** should be dissolved in six spoonfuls of water, and one spoonful should be taken every hour, until the dangerous symptoms are warded off, when the medicine may be administered at longer intervals. It will be obvious that the patient must remain perfectly quiet, and abstain from warm drinks, or any excitement at such times.

MENOPAUSE.—(*The grand Climacteric—Cessation of the Menses*).—This period, which is very frequently termed the CHANGE OF LIFE, occurs most commonly at or about the forty-fifth year. In some cases where menstruation has commenced early, and the person has lived luxuriously, it may terminate as early as thirty-seven, forty, or forty-second year; and, in other cases, with strong, vigorous ladies, the menses often continue to the forty-eighth or fiftieth year, or even to a more advanced period of life.

Its approach is usually manifested by some irregularities in the monthly flow. It may come on too soon, or be delayed one, two, or more weeks; and the discharge may manifest some change, being in some cases light or pale, being largely mixed with mucus; and in others being very profuse, not unfrequently amounting to profuse and alarming hemorrhages. Sometimes the flow comes on suddenly, and again ceases without warning, and unattended by bad symptoms. In some cases the change comes on so gradual and free from constitutional disturbance, that before the subject is fully aware of it, she has ceased to menstruate, and has safely glided over this troublesome passage into the serene ocean of after-life, exempt from many sufferings to which she had previously been exposed.

More frequently, however, as women approach this



period, they have turns of vertigo, headache, flushes of heat, occasional palpitation of the heart, more or less nervousness and some sense of debility; sometimes frequent passage of pale urine in large quantities, or of high-colored, scanty urine; pain in the lower part of the abdomen, back and hips, or extending down the thighs; heat in the lower part of the stomach and back; piles may be troublesome and bleed freely; swelling of the lower limbs or abdomen, which subsides without the usual symptom of flatulence; and pruritis or violent itching of the organs is not uncommon. This range of symptoms may appear in whole or only in part, or be variously modified in particular cases.

TREATMENT.—So long as the health is good, and the monthly flow is gradually diminishing from month to month, medicine is not required, but in all cases a proper diet and regimen is important. The diet should be simple, avoiding all stimulants, and all highly-seasoned stimulating meats, and using chiefly vegetable and farinaceous articles of food; frequent exercise in the open air in suitable weather, bathing, and the proper culture of the skin should not be neglected. The dress should be so regulated as to suitably protect the person, and prevent unnecessary exposure to the necessities of climate; and sleeping, also, in heated rooms, and on soft, heating beds, should be avoided. The SPECIFIC No. **Thirty-Two**, six pellets morning and night, will be generally efficient in arresting nearly all the disturbances arising during this period. Should there occur at any time such a discharge as to be serious or threaten a hemorrhage, rest, quiet, and the use of the SPECIFIC No. **Twelve**, in alternation with No. **Thirty-Two**, six pellets every hour, will promptly avert any danger. No fear need be entertained from the long-continued use of the SPECIFIC No. **Thirty-Two** during this period, as it may be used for months or years without prejudice.

LEUCORRHŒA.—(*Whites*).

Few affections of women are more common than this, and, perhaps, none more annoying. It consists of a discharge from the genital organs, mostly whitish, but not unfrequently discolored, and of varying nature and consistency. It most frequently occurs between the ages of puberty and the cessation of the menses, yet it is not uncommon in little girls or even young children, and occasionally met with in quite old women. Some persons and families are much more subject to it than others; those subject to catarrhs, and of relaxed habit of body, being most liable. The more common exciting causes are difficult or tedious labors; the immoderate use of the organs; late hours; abuse of tea, coffee and spices; luxurious living, and sometimes the neglect of proper bathing. When it appears in children, the cause is generally seat-worms, neglect of proper bathing, or some irritating matter or substance applied to the parts. This discharge is also most profuse just before and after the menstrual period, and during pregnancy. It may be trifling or quite profuse, and its character may vary as much as its quantity. At the commencement it may be only a slight increase of the natural, healthy, transparent mucus, but it gradually becomes more dense, thick and gelatinous; or it may become thin, milky, or acrid, at times rendering the parts sore or excoriated; in many cases it is yellowish and purulent; or again it may be greenish or even a brownish hue. The discharge often is not constant, but irregular, or by emissions. At first, and while the discharge is trifling, the system seems to feel the loss but slightly; but after a time the results begin to manifest themselves by constant pain in the back and loins; aching in the hips; bearing down or sense of weight low in the abdomen; pale face; coldness of the extremities; despondency or low spirits; loss of appetite; rising of wind or

food; nervous symptoms, neuralgia, and similar consensual manifestations. Leucorrhœa should always demand attention. On the first intimation of its approach, the subject should at once avoid the exciting causes, and apply the proper Specifics, and thus arrest at the commencement what might otherwise become an intolerable burden, or the forerunner of some serious uterine affection. Not unfrequently it is the symptom of some disease of the uterus which demands prompt and efficient aid.

**TREATMENT.**—Persons subject to this condition should carefully protect the feet and lower abdomen from sudden changes of temperature and colds, by wearing firm, substantial covering for the feet, and underclothing; avoid standing on the cold, wet ground; take moderate exercise in the open air; avoid over-heated rooms, coffee, exciting drinks or highly-spiced food, and should take of the SPECIFIC No. **Twelve**, six pellets night and morning. If the bowels are inclined to constipation, the SPECIFIC No. **Ten**, six pellets, may be taken at night, and the No. **Twelve** morning and at noon.

When leucorrhœa exists in connection with too scanty, infrequent or irregular menses, the SPECIFIC No. **Eleven** deserves a preference, and may be taken six pellets three times per day.

When it occurs *after child-birth*, SPECIFIC No. **Twelve** is the remedy, six pellets morning and night for a week. If this does not control it give No. **Eleven** in same manner. If it depends on a scrofulous taint of system, the No. **Twenty-Two** will be useful. Injections of the MARVEL OF HEALING and water, in the proportion of one part of the MARVEL and two parts of water, administered morning and night, are of the utmost possible value in arresting such discharges, stimulating contractions, and giving tone and vigor to the organs.

When it exists in little girls or young children, a careful

examination should be made for small pin worms which may sometimes be found lodged within the parts, and which should be removed by frequent bathings; and the child treated for worms, by giving the SPECIFIC No. **Two** each morning and the SPECIFIC No. **Twelve** at night, three pellets at a time.

### PROLAPSUS UTERI.—(*Falling of the Womb*).

This is also a very common complaint among women, affecting, in a greater or lesser extent, quite a proportion of the sex. Sometimes it is only a passing and comparatively trivial affection, coming on from some severe fatigue or over-exertion, and soon passing off from rest and a recumbent posture; while at others it is a constant and chronic affection, forbidding any considerable effort, and sometimes confining the patient to her room. The immediate causes of the prolapsus are various, among which the principal are: Getting up too soon after confinement; results of over-lifting or over-straining, or of falls; very severe coughs or vomitings; tight lacing, and a more or less relaxed habit of body; and, added to this, a more or less engorged or congested condition of the uterus itself. It is usually attended with a feeling of weight and heaviness low down in the abdomen; lameness or pain in the back and loins, dragging in the groins; a benumbing sensation extending down the limbs; a sensation as if everything would be pressed out while standing on the feet; a sensation also of emptiness, faintness, or "goneness" at the pit of the stomach; and often some difficulty in passing water or when at stool. In some severe cases there is difficulty in rising to the feet, and the patient must lean forward and support herself by placing her hands upon her thighs. All these sufferings are aggravated by standing or walking, and disappear or are relieved by lying down. There is also in many cases, a

constant discharge of mucus from the parts, often unhealthy and abundant, and the monthly period is generally too profuse, all of which contribute to increase the nervous debility, and exhaust the strength of the patient.

( TREATMENT.—In many instances, and in all the less aggravated cases, the use of medicines in the form of proper Specifics will be sufficient to remove the difficulty, if the patient will follow the treatment persistently, and avoid the exciting causes of the disease. But there may be cases so situated that mechanical aid, in the form of some of the various “pessaries” or “supporters”, is indispensable. But I think we should never resort to these until we have exhausted other means; as once introduced, they may and most likely will, become a life-long companion. When the symptoms are present, indicating a prolapsed condition, or those above described, the SPECIFICS No. **Thirty-Five** and No. **Ten** are the most efficient remedies and should be administered, six pellets of No. **Thirty-Five** each morning, and the same of No. **Ten** at night in all the milder cases. When the symptoms are more severe and decided, the pellets may be dissolved in water and administered as often as once in four hours, being at the same time careful to give the patient all the rest and quiet possible. When the displacement is severe and decided, and especially when it is the result of a recent strain, overlifting or accident, the patient should lie down upon the back, with the limbs drawn up, and endeavor to replace the organ, and to maintain the position until the organ has, in a degree, resumed its position, and the pains and dragging sensation has disappeared.

When prolapsus occurs in connection with chronic leucorrhœa, the SPECIFICS No. **Ten** and No. **Twelve** should be administered, giving each morning and afternoon, six pellets of No. **Twelve**, and at each noon and at night the same of No. **Ten** until this condition is radically removed.



## HYSTERIA.

Ladies between the ages of fifteen and thirty and more especially the unmarried, are subject to attacks of hysteria, which are in general connected with some anomalies in the menstruation, and mostly occur in connection with that period. The form and succession of symptoms are almost innumerable, since there is scarcely a form of disease that hysteria has not been known to simulate. The more frequent symptoms, however, are those of anxiety, depression, weeping; difficult or oppressed breathing; palpitation or nausea; sensation as if there was a ball in the throat, which proceeds from a pain in the left side; sometimes there is twisting or turning of the body, rigid, stiff limbs and clenching of the teeth. Then there are fits of laughing, crying, screaming, incoherent talking or frothing at the mouth, or hiccough. Sometimes an attack commences with violent spasmodic pain in the back, which may extend to the chest or stomach, with cold perspiration, pale, earthy face and weak, thread-like pulse. An attack lasts from a few minutes to several hours, and passes off with eructations, sighing, sobbing, and a sense of soreness in the whole body. It is quite common in some families and individuals, and it may be excited by sudden emotions. The predisposition to it is increased by an inactive life, free use of stimulants, or depressing mental condition.

TREATMENT.—See pages 268—269.

## INFLAMMATION OF THE LABIA.

An inflammation of the external organs of women occasionally occurs, during which one of the labia becomes swelled, hard, red and painful and sensitive. In some cases a swelling and suppuration and discharge similar to that of a boil occurs, all of which is very painful and



tedious. In some persons there are frequent repetitions of the same phenomenon. It may be occasioned by the rupture of the hymen, or from injury in the newly married, or come on as a consequence of tedious labors, or in other cases from some morbid condition of the system developing itself in this direction

TREATMENT.—When it is the result of violence or injury to the parts, the MARVEL OF HEALING, diluted one-half with water, and applied to the part by a cloth saturated with the lotion, will give very prompt and decided relief; and the SPECIFIC No. **One**, six pellets every two or three hours, may also be taken upon the tongue, and continued until the heat, swelling and pain has subsided. In cases where it assumes the nature of a boil, and suppuration occurs, or is inevitable, the SPECIFIC No. **Twenty-Two** may be given, six pellets every four or six hours, until cured. An occasional dose will prevent a return.

## PREGNANCY.

This period may be considered as perhaps the most important era in the life of woman. She is now no longer acting for herself alone, but becomes invested with a new and serious responsibility; as, upon her well or ill being during this period, may depend the future health and happiness of another, to whom she stands at once in the most endearing and most responsible relation. Experience, and the ample records of the most careful observers have clearly shown that the physical, mental, and even moral constitution of the future being is greatly modified, and in some instances formed, by the condition of the mother during this interesting period. Keeping this in view, we shall endeavor to point out for mothers that general course of conduct which will be most likely to secure for themselves ease and safety during the approaching trial; and for the

offspring, that physical and mental condition which will best fit them for the duties of life. Should these slight restrictions involve some self-denials or restraints, they may be assured that they will be more than repaid in their own welfare in the near future, and in the consciousness of having so truly contributed to the health and happiness of another.

The most common causes of weak and sickly offspring are: Ill health or constitutional taint of one or both parents; very early or very late marriages; too great inequality between the ages of the parents; errors in dress, diet, and general habits of life; and, finally, powerful mental emotions.

Fortunately, under the benign and yet potent influence of our system of treatment, not only long standing diseases, but also hereditary taints, may be entirely overcome and eradicated, so that we have less to fear than formerly in regard to their transmission to offspring. And it may as well be remarked here, that the intermarriage of relations or members of the same family, tends to aggravate and perpetuate any particular fault or vice of either parent, even though in some cases it may disappear in one generation, only to reappear in greater violence or strength in a succeeding one; while, by judicious intermarriage with persons of opposite temperaments, the fault or vice is constantly found to diminish.

It is not advisable for women in this country to enter the marriage relation before the twenty-first or twenty-second year, though it is undeniable that many have become strong, healthy mothers, lived to old age, and have reared large families of healthy children, who have married at a much earlier age; yet prior to this period, the organism is rarely fully developed and confirmed, and those who marry at sixteen or eighteen years of age, incur some hazard of severe after-suffering to themselves, and of giving birth to weak and delicate children. Not unfrequently the

**children** of very early marriages perish in infancy, or after contending with the various diseases of infancy in continual delicacy, sink into a premature grave. Women who marry late in life incur considerable personal risk, and their offspring are rarely healthy. The children of old men, though by a young wife, are often extremely delicate and very susceptible to illness, and not unfrequently precede their father to the grave, or linger but to drag out a miserable and wearisome existence.

Pregnancy should not be considered a state of disease, but as a natural function, and one which nature has taken great care to have as perfect in all its appointments, and as free from suffering as possible. When pregnancy runs its equable and uniform course, the expectant mother enjoys an almost complete exemption from prevailing epidemic, or even infectious diseases; and we likewise find that during its course chronic diseases are frequently suspended or modified. With the exception of some slight morning sickness, or other trifling uneasiness, a well constituted organism should enjoy as good health during this period as at any other. Thousands pass through it, giving birth to healthy and vigorous children without even the most trifling inconvenience or suffering. Though nature has taken kind care to render this season as far as possible exempt from disease on the part of the mother, and to provide for the health and welfare of the future being, yet in many instances her kind intentions are frustrated by the direct infraction of her laws. The expectant mother should therefore bear in mind the duty of leading, as far as possible, a regular and systematic course of life, since its violation may fall with fearful severity upon the helpless infant.

**AIR AND EXERCISE.**—Preservation and enjoyment of the highest health are dependent upon nothing more than the two points mentioned above, yet, perhaps, in nothing are

there more frequent errors. Neither air nor exercise is individually sufficient. Those who, from habit or fashion, merely take the air in their carriages, and shun the slightest physical exercise, either from habit or from acquired indolence, can scarcely expect to derive the benefit which nature has annexed to the observation of her laws, in a course of pregnancy, free from suffering, and the production of fully developed and healthy offspring.

During this period, therefore, passive or carriage exercise is not sufficient; on the contrary, continual passive exercise in a carriage has been found particularly injurious during and towards the end of the second period of pregnancy, and is frequently the cause of premature or abnormal births. Exercise on horseback, even without taking into consideration the risk of fright or accident to the rider, and the fearful consequences that may therefrom result, is still more objectionable for many reasons. Walking, and that frequently in the open air, only meets every indication, as it not only brings the whole of the organic muscles into play, and imparts tone and strength to them by their exercise, but likewise imparts the increased vigor and energy of the mother to her offspring.

Another class, that of thrifty housewives, take a great deal of exercise, but without corresponding benefit, as it is mostly within doors; and in many cases these women, either from activity of temperament or the seeming necessities of their position, frequently over-fatigue themselves, rise early, toil constantly, retire late and frequently slumber unrefreshingly, and in this manner undermine their organic powers, to their own permanent loss and injury, and that of their offspring.

There are still others who not unfrequently injure their health, or bring on a miscarriage through excessive levity and thoughtlessness, by unrestrained indulgence in active exercise, running, romping, riding on horseback, dancing,

*etc.* Such should remember that a miscarriage once or twice induced is likely to return again upon the slightest provocation, and that, when several have taken place, the greatest care and skill is required, even if it be possible to enable her to attain her full time; and that frequent casualties of this nature not unfrequently undermine the constitution, or terminate in that serious and painful disease, uterine cancer.

The best exercise, therefore, for a person during this period, is walking every day when the weather permits, in the open air. In order to prove beneficial and not to interfere with digestion, exercise should be taken two or three hours after a moderate meal, about midday, or in the afternoon, except during hot weather, when the morning or the evening may be preferred, taking care to avoid the night damps by not remaining out too late.

**CLOTHING.**—The dress of the expectant women should of course be suited to the season, and in passing from a warm to a cold atmosphere, the throat and neck should be well protected, to avoid the risk of taking cold. But a point of far greater importance is the adaptation of clothing to her form, so as to preclude all unnecessary pressure upon any part of the frame calculated to interfere with the functions of those important organs which are destined for the birth and nourishment of the infant; tight lacing, therefore, at all times most objectionable, is peculiarly so at this period, inasmuch as it cramps the natural action of the body, and bearing directly upon the abdominal muscles, the blood-vessels, the lymphatics, and the whole intestinal economy, produces narrowness of the chest, disturbed circulation, and induration or other derangements of the liver; and exercises a most baneful influence upon the breasts and uterus. We should bear in mind that pressure upon these organs during development takes place in direct contravention of the operations of nature. Ladies in their efforts



to preserve the elegance of their shape during pregnancy, are little aware that the constricting force thus exercised upon the abdominal muscles, destroys their elasticity, prevents a proper retraction after parturition, and thus proves one of the most common causes of permanent abdominal deformity. Besides, to the culpable vanity of their mothers in this and other respects, many, it is probable, owe their club-feet and other malformations; and in addition to these evils, this practice not unfrequently deranges the position of the foetus, a displacement, which, in addition to the consequent want of energy in the muscles of the parts concerned, often results in protracted and dangerous labors. Besides, this tight lacing is liable to produce a premature labor. To tight lacing also may be attributed the difficulty which many women experience in suckling their children, from the incipient process required for the subsequent secretion of milk having been interfered with by the unnatural pressure upon the beautifully constructed mechanism of the breasts. From this, also, sometimes arises cancers and other affections of the breast, and also the retraction and diminution of the nipple from which the act of suckling is rendered difficult, and in some cases impossible. Young girls of seventeen or eighteen are frequently found with pendulous breasts, owing to an artificial support having usurped the office of muscles intended by nature for that purpose, thus throwing them out of employment. Garters too tightly bound are generally injurious, more particularly to pregnant females, as the pressure thus exercised upon the blood vessels tends to the development of varicose veins in the inferior extremities, (to which the system is already sufficiently predisposed), which thus, in many instances, become painful and troublesome.

DIET.—The greatest simplicity should be observed in regard to food. The quantity should be such as to afford a generous nutrition for the system, while an excess is pre-



judicial, causing dyspepsia and general uneasiness, and from its mechanical effects acting injuriously upon the fœtus, which also shares in any derangements of the mother.

The *quality* of her food is important; everything possessing a medicinal property should be avoided, and only that selected which is simply nutritive. Coffee and green tea should be wholly abandoned, and black tea in moderation should be used if any. Wines, liquors, beer, or other stimulating beverages are injurious. Where women have been long accustomed to them, a little good wine may perhaps be taken daily, but the better rule is to avoid stimulants of every kind altogether.

**MENTAL EMPLOYMENT AND GENERAL HABITS.**—While the body should be maintained in a condition of health, the mind also should be kept in a state of serenity. An easy cheerfulness of temper, and freedom from oppressive care and anxiety, are essential to the well-being of the unborn infant. It is well settled, from repeated observation, that the predominant feeling or tone of mind of the mother has often cast its shade over the future mental organization of the child; and this fact illustrates the importance of keeping the mind properly occupied during this period, and that its meditations should be cheerful and free from depressing influences and gloomy forebodings on the one hand, and the levity, frivolity, and excitements of fashionable dissipation on the other. Nothing can well be more injurious to the future physical and mental well-being of the child, than a round of giddy dissipation, late hours, and fashionable excitement, in connection with physical indolence and inactivity.

**INFLUENCE OF EXTERNAL OBJECTS UPON THE UNBORN INFANT.**  
“The effect of any unpleasant or unsightly object upon the imagination of the mother, and the transmission of that effect to the offspring, as manifested in various mental or physical peculiarities after birth, is a theory as old as tradition.

Without entering into the various arguments both for and against it, we simply advise expectant women to keep as much as possible out of the way of such objects, and to preserve body and mind in a state of health, which will lessen the fear of being affected by such occurrences; and endeavor to direct the attention as much as possible to pleasing subjects, as it must be evident that *brooding over unpleasant impressions* can scarcely fail of being both physically and mentally injurious."

MENTAL EMOTIONS, DESPONDENCY.—In some cases, and especially with delicate, sensitive, ladies, and more commonly with first children, there is great mental despondency, dread of the future, and fear of approaching death. Some women, who in general have a fine flow of spirits, are particularly depressed and gloomy during this period, and with others there is this depression during the period of nursing. When it occurs early during gestation, it usually passes off before delivery, and is in no case to be considered as an unfavorable indication, and is in general without injury to the physical health.

TREATMENT.—Our method of treatment will do much to remove or mitigate it. When this condition is attended with some febrile movement, fullness of the head, or heat of the hands, the SPECIFIC No. **One**, six pellets taken dry on the tongue morning, and at night, will be sufficient to remove it. When it is attended with morning sickness, the SPECIFIC No. **Ten** may be taken at night, and the No. **Twenty-Nine**, six pellets in the morning, will afford relief to both affections. When there is excessive dejection and great lassitude, the No. **Thirty-Five** may be given, six pellets at a time, three times per day. These remedies will usually be found quite adequate for the removal of any difficulties of this nature.

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## DISORDERS INCIDENT TO PREGNANCY.

**MENSTRUATION.**—Usually, with the commencement of pregnancy, menstruation ceases. In some cases, however, it may continue in some degree during the period of gestation, especially the first two or three months. It should not be considered as a disease, strictly speaking, yet it is one of those abnormal conditions which require attention, and should be remedied at the earliest moment.

**TREATMENT.**—Six pellets of the SPECIFIC No. **Ten**, taken at night, and the same quantity of No. **Thirty-Five** each morning, will, in general, arrest the discharge. Should the discharge be attended with cramps, pain, or bearing down, the SPECIFIC No. **Thirty-One** should be taken in preference, six pellets every two, three or four hours, according to the urgency of the case, until relieved. Should the discharge again appear the subsequent month, the same treatment should be pursued, and so continue so long as is required.

**MORNING SICKNESS.**—Nausea, vomiting, heartburn, constituting what is usually termed morning sickness, is one of the frequent and annoying accompaniments of pregnancy. In some cases these symptoms appear immediately, or soon after conception, but in most cases at about the sixth week. The most decided symptoms occur in the morning soon after rising, though in many cases they continue all through the day and are quite marked in the afternoon. The usual symptoms are nausea, qualmishness, then vomiting; sometimes only a single retching; at others severe and oft-repeated vomitings, with constant loss of appetite, and heartburn. In general these symptoms disappear soon after quickening, about the fourth month, but in others they continue to annoy during the entire period. In some cases these symptoms form but a trifling annoyance, scarcely noticeable; at others they form a most distressing and pain-

ful attendant of this interesting period. Sometimes the suffering has been so terrible, and the remedies of old school medicine so fruitless, that premature delivery has been resorted to. Our treatment, fortunately, contemplates no such serious alternatives, as in general, all the serious symptoms, and even the inconveniences of the period, are promptly relieved.

TREATMENT.—The SPECIFIC No. **Twenty-Nine** is very generally efficient. Take six pellets dry on the tongue at night on retiring, and in the morning *before* rising, and again at mid-day if needful. In some severe cases it may be better to dissolve twelve pellets in six spoonful of water, and of this take a spoonful every two hours during the waking hours. In some extreme cases, when the nausea and vomiting is excessive, the SPECIFIC No. **Six** may be taken in the same manner as above indicated.

CONSTIPATION.—Constipation, more or less marked, is a very common attendant of pregnancy. If persons are habitually of constipated habit, it becomes more decided during this period. See page 387. In addition to treatment there advised, in some cases the SPECIFIC No. **Twenty-Nine**, six pellets at night, and the No. **Ten** in the morning, will answer the purpose better. Enemas of tepid water may be resorted to if necessary.

DIARRHŒA.—In some cases, diarrhœa more or less decided, or in occasional attacks, occurs during pregnancy, and especially in the latter stages, should demand attention. The usual remedies for this disease, as mentioned in the chapter on that subject, will be found efficient. Generally a few doses of the SPECIFIC No. **Four**, six pellets taken dry, and repeated after every stool, will be sufficient to arrest the difficulty. If the discharges are very loose and watery, the SPECIFICS No. **Six** may be more appropriate.

DYSURIA.—Difficulty in passing the water is not of unfrequent occurrence with pregnant women. And in some

cases the calls are so frequent and annoying as to demand attention.

For SYMPTOMS and TREATMENT see page 412.

FAINTING AND HYSTERIA.—Delicate, sensitive, or nervous women, are sometimes attacked with turns of fainting during pregnancy. They are generally without serious annoyance, and pass over readily. Plenty of exercise in the open air, and attention to proper rules of diet and regimen, are the best preventatives against this affection; but in cases where these prove insufficient, we should endeavor to ascertain and remove the cause. Tight lacing, warm rooms, the free use of coffee or other stimulants may be the exciting cause, and their simple removal will prove efficient. Should an attack not immediately pass off, loosening the dress, removal to the fresh air, and sprinkling the face with cold water, are the most judicious means of revival. The SPECIFIC No. **Three** will at once quiet the nervous excitability of the system, and may be given in portions of two pellets, repeated hourly, if occasion requires. To prevent the recurrence of similar attacks, especially if the patient be of full or plethoric habit, the SPECIFIC No. **Thirty-Five** may be given, six pellets night and morning. These remedies will rarely fail to afford the desired relief.

TOOTHACHE.—This is a very frequent and annoying affection in the earlier months of pregnancy, and is sometimes one of its earliest indications. See pages 262—264.

TREATMENT.—The SPECIFIC No. **Eight** may be first tried, six pellets dry, and administered every hour. Should relief not be afforded in some hours, give SPECIFIC No. **Three** in the same manner. Should there be throbbing in the teeth or face, the No. **One** will be efficient. In very sensitive, nervous subjects, SPECIFIC No. **Eleven** has proved promptly curative. In full blooded, plethoric subjects, SPECIFIC No. **Thirty-Five** has often cured. These remedies, or even



others may be used in succession, or even in alternation, with success.

**SWELLED FACE**—tumefaction of the cheek.—In addition to treatment recommended on page 265, the use of **SPECIFIC No. Eleven**, given in doses of six pellets, and repeated every two hours in alternation, will prove efficient.

**VARICES**—(*Swelled Veins*).—It not unfrequently occurs in the later months of gestation, that some women suffer from distention and enlargement of the veins of the thighs, lower abdomen, and of other parts. The veins in these situations become enlarged, blue and turgid, inducing sometimes pain and much inconvenience. They are, in part, occasioned by the pressure of the gravid uterus upon the blood vessels, thus obstructing the circulation; and, in part, from constitutional weakness of the individual, reflected upon the venous circulation. Unless relieved, the varices are liable to remain even after the occasioning cause has disappeared, and to give serious inconvenience in after-life. They are much increased by the use of stimulants, which should, under such circumstances, be avoided, as well as an indolent habit of life.

**TREATMENT.**—A reasonable amount of exercise should be enjoined, and the parts affected should be bathed morning and night with the **MARVEL OF HEALING**. Half a teaspoonful of the **MARVEL** should be taken internally three times per day.

In severe cases of varicose veins of the legs the best treatment is to order an elastic stocking of proper length and size to cover the part. Then, elevating the limb so as to drain the blood from the veins as far as possible, lay over the swelled veins a cloth saturated with the **MARVEL OF HEALING**, and over this turn the elastic stocking or band; renewing the same morning and night. Not only all trouble may thus be avoided, but a permanent cure may likewise be effected.



**PAINS IN THE BACK.**—(*Lumbo-Sacral Pains*).—Some women suffer during pregnancy from pains in the lower part of the back, sometimes proving quite distressing, especially when they occur at night, and thereby disturb sleep. They are generally described as an aching, or a dull, heavy, dragging pressure, as if from a weight resting upon the affected part. They will usually be relieved by the use of the SPECIFIC No. **Fifteen**, six pellets three or four times per day. Sometimes they are associated with PILES, in which case the SPECIFIC No. **Seventeen** may prove the more efficient remedy, and may be given as above, or may even be given in alternation with the No. **Fifteen**. Usually six pellets of No. **Ten** at night, and of No. **Fifteen** each morning, will afford satisfactory relief.

**MISCARRIAGE.**—Miscarriage may occur at any period between the first and seventh month, but in the large proportion of cases, it occurs about the third or beginning of the fourth month. When it takes place *before* or *about* this period, it is frequently attended with but comparatively little pain or danger; yet frequent miscarriages at this period, from the great discharges that take place, tend to undermine the strength and constitution of the patient, and not unfrequently produce as a result, barrenness or severe chronic disease. When a miscarriage occurs at a more advanced period, it assumes a very serious complexion, and is often attended with a considerable degree of peril to the sufferer. Women who have once suffered from the occurrence of a miscarriage, are exceedingly liable to its recurrence, and this liability is increased with every subsequent miscarriage; so that in a comparatively short period, a condition is induced which renders it exceedingly difficult for the womb to retain the foetus up to the full term, resulting in a very intractable form of sterility.

The premonitory and accompanying symptoms of miscarriage vary much in their nature; sometimes a discharge

of blood occurs which is very profuse, and at others moderate or even inconsiderable; the pains in some instances are severe and protracted, and at others comparatively slight and of short duration.

*Sudden mental emotions, or great physical exertion; mechanical injuries, such as shocks, blows, or falls; a luxurious mode of life, fashionable habits or dissipations; powerful aperients; neglecting to take air or exercise, are some of the more common exciting causes of the affection; and to this should be added, that the predisposition is strong in the highly plethoric, and those of delicate and nervous habits. An abnormal condition of the system is doubtless the predisposing cause.*

Miscarriage is generally attended by the majority of the following symptoms: A sensation of chill, followed by fever, with more or less bearing down, particularly when occurring late in pregnancy; also *severe pains in the abdomen, drawing or cutting pains in the loins*, or pains often bearing a close resemblance to those of labor; discharge of viscid mucus and blood, sometimes of *bright red* blood, not unfrequently mixed with coagula, at other times *dark* and clotted blood, followed by emissions of serous fluid. The miscarriage generally occurs during this discharge, which occasionally continues, if not checked, to flow for some hours, often placing the sufferer in considerable jeopardy. When the pains increase in intensity, and the muscular contractions become established, with their regular throes and efforts to dilate the mouth of the womb, miscarriage is almost inevitable.

TREATMENT.—In cases where a women has had one or more miscarriages, it is evident that a predisposition to this accident exists, and more than usual care should be exercised to prevent a similar result, and such persons should especially avoid all the exciting causes which have been above mentioned. But, beside these prudential considera-

tions in habits, labor and exercise, proper medicine may be taken to allay or remove that morbid irritability of the uterus, which lies at the foundation of the difficulty. To this end the SPECIFIC No. **Eleven**, simply six pellets taken every other night, and continued along during the period mentioned from the second to the fourth month, will prove efficacious. Sometimes the occasional use of *Sabina*, sixth dilution, or of *Secale*, same dilution, given at intervals of six or eight days, will produce a similar result.

When the symptoms indicating an impending miscarriage have made their appearance, such as: A *slight show*; sensation of dull, heavy pressure in the back or loins; pains in the lower abdomen, bearing down or dragging, the patient should at once retire to her room, assume the recumbent posture, or in some cases go to bed and sleep with but slight covering; the apartment should be kept cool, and every method be employed to ensure perfect tranquillity of mind. The diet should be light, and warm or stimulating drinks be generally avoided. If the misfortune has proved unavoidable, or has accidentally taken place before assistance has been sought, the patient ought still to remain quiet a few days, lest a fresh discharge should be brought on from too early getting up, or going about. When the first symptoms mentioned above are perceived, six pellets of SPECIFIC No. **Eleven** should be taken dry on the tongue, and perfect rest and quiet enjoined. If not better in an hour, take the same quantity of SPECIFIC No. **Three**, and continue these two medicines in alternation, at intervals of one, two or three hours, according to circumstances, diminishing the frequency of doses as the symptoms diminish or disappear.

Should the miscarriage have occurred, or become inevitable from the great loss of blood, six pellets of SPECIFIC No. **Twenty-Four**, given every half, or even every quarter of an hour, will be among the best means to arrest

the flow, and given four times per day, it relieves the exhaustion and debility resulting from such hemorrhage or accident. In extreme cases, when the excessive flooding, occurring at later periods of pregnancy, produces faintness and exhaustion, or threatens life from its excess or long continuance, the use of HUMPHREYS' MARVEL OF HEALING, half a teaspoonful, repeated every half hour or at longer intervals, according to circumstances, acts like magic, and arrests the frightful flow. The hips should at same time be raised to a higher level than the shoulders.

### TREATMENT BEFORE PARTURITION.

PREPARATION OF THE BREASTS.—Young mothers frequently find great difficulty in suckling their children, resulting from some organic defect, or imperfect development of the nipple. In many instances the structure of the breasts is disorganized, from an ignorant nurse having compressed them in infancy, under the idea of such a process being needful for the expulsion of some matter in the breast of the child; a vulgar error, against which mothers should be particularly watchful. Inability to nurse is also liable to occur from the pressure of stays in after life, by which the cuticle is rendered so tender as to preclude nursing. In almost every case a preparation of the breasts is necessary some weeks before delivery, in order to prepare them for their future office.

The first two instances, organic defect or an undeveloped nipple, may be beyond the power of art. If suckling be attempted, induration of the nipple and breasts ensues, attended with severe suffering. If, however, a simple tenderness of the epidermis exists, the evil will be much alleviated by bathing the nipples in brandy each morning and night for several weeks before delivery. Another diffi-

culty frequently accompanying this state, is a shortness or retraction of the nipple, so that the infant cannot take hold of it. This also is frequently a cause of the first, from the frequent ineffectual efforts of the infant to suck, injuring the part. In this case, appropriate shields of rubber or wood may be applied, to accustom the nipple to elongate and protrude, so as to present a sufficient hold for the infant when the period for suckling arrives, and then the efforts of the child will still further contribute to the same object. In this case also, bathing as before mentioned, with brandy, will tend to correct any tenderness of the skin, and prevent subsequent excoriation.

REMEDIES BEFORE LABOR.—Many things have been recommended before labor, and among them blood-letting and aperient medicines, with a view of preparing the system for the important function. But better judgment and experience has discarded them as being in no wise necessary, but often injurious, tending to impair the energies of the system, and to place the system in an abnormal state of irritation and excitement. Where an evidently plethoric state exists, with fullness of the head and system generally, six pellets of SPECIFIC No. **One**, repeated daily, or even more frequently, will be found fully sufficient and will serve a far better purpose than bleeding or aperients.

A movement of the bowels previous to delivery is desirable, and may be obtained by a simple enema of warm water, to which may be added, if the simple warm water should prove insufficient, a large spoonful of oil.

FALSE PAINS.—In some cases real labor is preceded for a few hours, and indeed in others several days or even weeks, by what are known as *false pains*. They are the result of congestion of the organs involved, and result from errors in regimen, emotions of the mind, effects of a chill to the abdomen, or other exciting causes. They differ chiefly from

labor pains, *in the irregularity of their recurrence; in being unconnected with uterine contractions; are chiefly confined to the abdomen, with sensibility to touch and movement; and in not increasing in intensity as they return.* Occasionally, from their close resemblance, it is quite difficult to discriminate between them and real labor pains, and in such instances we must be guided chiefly by the period of gestation; and our proper and safe mode is to endeavor to control them, if they occur at a period some week or two before the proper time for labor, and mitigate the sufferings of the patient; as, if they are permitted to go on unchecked, they may continue until the time of delivery, rendering the labor more painful, exhausting, and tedious. Proper medication will, in general, either arrest them, or convert them into true labor pains.

TREATMENT.—Generally a few doses of SPECIFIC No. **One**, six pellets, repeated at intervals of one or two hours, will be found sufficient. Should, however, the result not be satisfactory, administer the SPECIFIC No. **Eleven** in the same manner, or give the SPECIFIC No. **Three**, if the patient should be very nervous or excitable.

## PARTURITION.

Natural labor takes place at the end of the ninth month of pregnancy, or two hundred and seventy days from the period of conception. Counting six weeks to the usual appearance of morning sickness, and four months to the period of quickening, and nine months from the last menstruation, the period of labor may be looked for with tolerable certainty. The pains accompanying uterine contractions are regular and effective, and the entire process does not continue beyond twenty-four hours, rarely above twelve, and quite frequently not longer than four or six. Were it not that acquired habits often derange or



distort the natural and symmetrical provisions of nature, habits that weaken and enervate, and customs that distort and derange, either acquired or transmitted), parturition would be comparatively free from pain and almost free from danger.

**TEDIOUS LABORS.**—When labor is protracted beyond the period above mentioned, or is attended with an excessive degree of suffering, which is the more liable to occur when the woman is of slender form, and of highly nervous and sensitive habit, it is proper to avail ourselves of all the resources of art, to mitigate her sufferings.

Thus, if the pains seem to be ineffective, the face red and flushed, and the patient distressed, out of proportion to the effectiveness of the pains, give six pellets of the SPECIFIC No. **One**, and repeat it in an hour if not relieved.

If the pains are what are called *wrangling*, in the abdomen or lower extremities, and not from the back, drawing down forward, give the No. **Eleven** in the same manner.

If the patient is very nervous, excitable, and the pains slight or inefficient, even with some tendency to cramps of the extremities, give the SPECIFIC No. **Three**, six pellets every half hour, and repeat it until these symptoms yield, and the pains become strong and expulsive.

**CRAMPS AND CONVULSIONS.**—In complicated labors we sometimes have spasmodic pains as indicated above, which do but little towards advancing the labor; and, in rare cases, severe cramps, or even convulsions. These should be carefully guarded against. The SPECIFIC No. **Three** should be given, six pellets, dry on the tongue, and repeated every half hour, or hour, so long as extreme nervousness and excitability of the patient continues. If, notwithstanding its use, and the very essential procedure of keeping the room quiet, and exciting persons or things as far removed as possible, the excitement of the patient still continue, or in case actual cramps or convulsions have supervened, give

the SPECIFIC No. **Thirty-Three**, six pellets at once, and repeat it every hour until the danger is removed.

### TREATMENT AFTER DELIVERY.

Immediately after delivery, and the proper adjustment of the bed, the woman should be left to the undisturbed rest and repose which are the great restoratives of nature. Everything which tends to excite the patient—noise, light, talking, or excitement of any kind—should be avoided, and the patient be quietly allowed to rest for some hours; yet it is commendable to see that the discharges are not excessive, and that the pulse is not sinking. An hour or two of good quiet rest will do more to restore, than tea, stimulants, or food at this time. Should the patient be kept from sleeping, from excitement, give six pellets of SPECIFIC No. **Three**, which will soon allay it, and serve also to stimulate the natural contractions of the womb. In the event of too profuse discharge, or even flooding, the No. **Three** may be given, six pellets every half hour; or should there be faintness, or very profuse flow, a half teaspoonful of the MARVEL OF HEALING may at once be resorted to, and repeated every half hour until it is controlled.

The patient should mostly keep her bed for the first eight days; after four or six days, if she feels strong and so desires, she may be permitted to sit up a short period daily, to have her bed made and aired. It is important for the womb to reduce itself and recover its natural position; that the women be kept at rest, and in a recumbent posture for the eight or fourteen days, and careful attention to this advice will prevent much of infirmity, debility, and after-disease. The diet should be of light and easily-digested food, avoiding all stimulants or exciting beverages, and being guided in quantity by the desires of the patient; bearing in mind that for the first few days, nature calls for

but little nourishment, and that if given when the patient does not desire it, it will be more liable to be injurious than beneficial. All stimulating or very nutritious food must be avoided the first few days.

For the constipation, which is the natural result of delivery, nothing should be done at first, as it is altogether a proper and salutary condition; time being required for the organs to regain their natural tone and position, which should not be interfered with by aperients. If, after four or six days, the bowels should not move spontaneously, an injection of warm water may be administered, and assisted by six pellets of SPECIFIC No. **Ten**, given at night, and these may be repeated, if necessary, until natural evacuations are established.

SUPPRESSED OR SCANTY SECRETION OF MILK.—It is of importance that the processes of nature follow in proper order, and with due regularity, and hence, it is proper to correct, so far as in our power, any important deviation. Sometimes the proper secretion of milk is prevented by undue heat, distention, excessive or undue vitality of the breasts. In such cases, a few doses of SPECIFIC No. **One**, six pellets given at intervals of four hours, will allay the heat and distention, and the secretion will proceed with regularity. If, however, the secretion seems to fail from a want of secretory power in the gland itself, the use of SPECIFIC No. **Eleven**, given in like manner, will promote the natural flow.

MILK FEVER.—The secretion of milk in considerable quantities is often preceded or accompanied with a general febrile movement of the system, which is known by the term of *milk fever*. It is known by thirst, slight shivering and heat, terminating in mild perspiration; the pulse is quickened, and sometimes variable; at times frequent, or soft and regular. Sometimes there is drawing pain in the back, extending to the breast; bad taste in the mouth;

oppressed respiration, anxiety and headache; the exacerbation comes on towards evening, with perspiration towards morning, and temporary relief or termination of the attack, which not unfrequently returns the following day, but rarely rises to such a height as to indicate danger. Nature herself, if not disturbed by injudicious treatment, in most cases restores the proper equilibrium. When the milk secretion is established, and the lochial discharge resumes its wanted course, the derangement generally ceases. Should, however, the affection become established, we may apprehend the setting in of puerperal fever.

The indications above mentioned call for the SPECIFIC No. **One**, which may best be given by dissolving twelve pellets in six spoonsful of water, of which one may be given every hour at first, and then at intervals of two hours, until the fever quite disappears, and the normal secretions are established.

LOCHIAL DISCHARGE.—This continues, usually, from nine to fourteen days, but varies considerably in different women, sometimes being but slight, at others, copious and continuing for a long time. Its deviations require attention. If it becomes suppressed, or thin, pale, and prematurely scanty, SPECIFIC No. **Eleven** should be given, six pellets every two or three hours. If pain and fever attend the diminution or suppression, No. **One** should be given in water, twelve pellets every hour, until this condition is removed. If it is too free, or remains full or high-colored after nine days, SPECIFIC No. **Twenty-Four** should be given, six pellets three times per day.

ALOPECIA.—FALLING OUT OF THE HAIR.—Not unfrequently, especially in feeble or debilitated constitutions, the hair falls out, during or soon after the period of confinement. If the patient is debilitated in consequence of flooding, or the excessive drains upon the system, the evil will be corrected by the use of SPECIFIC No. **Twenty-Four**, taking

six pellets three times per day. If the cause is not so apparent, and must be sought for in some inherent delicacy of the constitution, the use of SPECIFICS No. **Thirty-Five** and No. **Twenty-Nine**, giving six pellets of the former in the morning, and the latter at night. Care should be taken in dressing the hair during this condition of the scalp, not to comb or brush it too harshly, as you may thus pull out large quantities of hair that a more appropriate management would have preserved.

LEUCORRHEA AFTER PARTURITION.—Appears, at first, only as an extension of the natural discharges in consequence of the relaxation of the uterine economy; at the beginning mild and innocuous, but gradually assuming an acrid or morbid condition, producing sensibility and excoriation. It is sometimes very obstinate and often troublesome.

For TREATMENT, see page 428.

INTERNAL SWELLING AND PROLAPSUS of interior organs is frequently the result of difficult labor, and is often found complicated with uterine or vaginal prolapsus. The use of the MARVEL OF HEALING externally as a lavement, and as an injection prepared as above, one part of the marvel to two of water, is sovereign in all similar cases, and may be administered two or three times per day. At the same time, SPECIFIC No. **Thirty-Five**, six pellets, may be given, three times per day.

METRITIS.—(*Inflammation of the Womb*).—The more constant symptoms of this very serious affection, are: Fever, pain, continuous burning or shooting in the lower abdominal region, accompanied with a sensation of weight; soreness or tenderness of that region on pressure or movement. The abdomen becomes hot, and gradually tumefied, the secretion of lochia and milk diminished or arrested, likewise the urine and feces. It is usually caused by severe, unnatural or protracted labors, or by harsh manual interference during labor, or may result from retained placenta or clots, or



mental emotions, chill, etc. In a less active form, it may occur in women who have never borne children, as the result of chill, cold feet, inflammation of neighboring organs, external injuries, etc.

The SPECIFIC No. **One** should be given, twelve pellets dissolved in six large spoonful of water, of which one should be given every hour, and this medication continued with entire rest and quiet until the power of the disease is broken, and the normal discharges re-established.

EXCORIATION OF THE NIPPLES.—If the nipples have been properly prepared for their office by frequent bathing with brandy, the MARVEL OF HEALING, or other hardening preparations, there will be less liability of excoriation; nevertheless, it sometimes appears, owing to some peculiar dyscrasia of the system. The nipples become sore, excoriated or cracked, and bleed, and are exquisitely painful at every attempt of the child to nurse.

TREATMENT.—From the first, after every nursing, the nipples should be carefully moistened with the MARVEL OF HEALING, diluted one half with water; and, after being thus thoroughly moistened, should be carefully dried with a soft cloth or fine lint, and this process should be constantly repeated after nursing. In some cases a soft rubber shield can be worn to advantage, but to be effective, it must fit nicely, and be worn easily. Internally, the SPECIFIC No. **Three** should be given, six pellets three times per day, to remove any constitutional impediment to the healing. In cases where these remedies remain ineffectual, resort may be had to a dose of six pellets of SPECIFIC No. **Twenty-Two**, at night, while the No. **Three** is given morning and at noon; and so continue for some days.

MASTITIS.—(*Inflammation of the Breasts—Gathered Breast—Ague in the Breast*).—It commences with a chill, to which some degree of fever is soon associated, and the breast, or some portion of it becomes **tumefied**, swelled, sensitive and



painful, with an erysipelatous swelling and redness extending over some portion of the surface. In case the inflammation is not early arrested, suppuration takes place, the swelling points, and the abscess must be opened and pus discharged; or it will open of itself, causing a much more extensive disorganization and discharge, and a disfiguring cicatrix.

TREATMENT.—SPECIFIC No. **One** should be given at once, twelve pellets dissolved in six dessert spoonsful of water, and of this a large spoonful should be given every hour for the first twelve hours, and then every two hours, until the inflammation subsides. Advantage will also be derived from the application of a cloth, several folds of which have been saturated with the MARVEL OF HEALING, and applied well over the part or breast, and the whole covered with flannel, so as to protect the clothing and person from moisture, and the application may be removed as often as it gets hot or dry.

If the inflammation has progressed so far that suppuration cannot be arrested, or has already taken place, the use of SPECIFIC No. **Twenty-Two**, six pellets every three hours, will be the best medicine to promote that object, and at the same time to limit its extension. It is likewise the best medicine, to limit the suppurative process, and heal the wound after the abscess has been opened.

WEAKNESS OR PERSPIRATION DURING CONFINEMENT.—Sometimes there remains an excessive degree of debility after delivery, continuing several weeks beyond the usual period; and in consequence the patient sweats easily during any effort, or on going to sleep. This condition of weakness, indicating an exhausted or enfeebled vitality, is best met by SPECIFIC No. **Twenty-Four**, of which six pellets may be given dry, four times per day, with advantage, or simply at night, six pellets, if there is merely too free perspiration at night, or on sleeping.

**OVARIAN DROPSY.**—(*Ovarian Tumor*).—We mention this disease here, as it usually first presents itself in the form of ascites or abdominal dropsy; but in this case there is always a tumor or morbid growth from one of the ovaries, generally the left, which, gradually enlarging apparently from just above the pubic bone, more on one side, extends upwards and over the abdomen, at first more hard and firm, and to which the softer fluctuation of the fluid is afterwards associated; for it is only after the weight and volume of the tumor has compromised the abdominal circulation, that the effusion takes place. When this has occurred, the symptoms are not unlike ascites—large tumid abdomen, œdematous extremities, and scanty secretion with often-disturbed menstruation.

**TREATMENT.**—The SPECIFIC No. **Twenty-Five** may be given as in general dropsy, six pellets dissolved in water, and administered every three hours.

A remarkable cure was made by the use of HUMPHREYS' MARVEL OF HEALING, not only of the effusion but of the tumor itself, and should the No. **Twenty-Five** fail, I should not hesitate to recommend its adoption.

### TREATMENT OF INFANTS.

Homeopathy possesses many advantages in the treatment of the diseases of children and infants. The first manifestations of morbid action are thus met in their formative stage, and not only are they crushed in the bud, but the tendency thereto is eradicated from the system. Constitutional tendencies to disease are thus destroyed, and the entire development is symmetrical and happy. On the contrary, when the diseases of infancy and early childhood are met by the pernicious drugs so much in vogue in the old school of medicine, not only are the diseases themselves not eradicated from the system, but drug action is often set

up, false, perverted or morbid action is engendered, and the germs of what become life-long maladies are thus unwisely planted. Thousands of ill-developed, misanthropic, and unhappily constituted persons, owe their life-long infirmities to the injudicious use of drugs or crude medicines, given with the best intentions during their infancy.

AFTER BIRTH.—Immediately after the separation of the cord, the child should be wrapped in a soft flannel, which has been carefully warmed, and be laid upon its *left* side. After the mother has been cared for, the child should be washed with tepid water, with a soft cloth, care being taken not to continue the first washing too long, not to rub the child, nor to apply soap, as the skin is very delicate and tender, and the entire organism unaccustomed to cold, or to rough usage. After washing, dry the infant immediately, by taking up the moisture with a soft, warm cloth, rather than by rubbing, always avoiding the risk of the child becoming chilled or taking cold. Nor should infants be swathed or overburdened with a superfluity of clothes, a source of not unfrequent deformity and weakness.

SWELLING OF THE HEAD very commonly appears in infants to some extent, and sometimes, indeed, a large tumor appears, which seems very formidable, and excites apprehension. This swelling generally disappears of itself after a few days. Should it be considerable, wetting the head with the MARVEL OF HEALING, diluted one-half with tepid water, will rapidly promote the absorption of the tumor. Should there be a swelling which seems to contain fluid over the fontanel or large opening on the head, one pellet of SPECIFIC No. **Twenty-Two** will hasten its removal.

EXPULSION OF THE MECONIUM is best effected by the natural milk of the mother, which, at its first appearance after delivery, has the precise qualities adapted to that purpose. Hence, so soon as the child begins to desire food, and the mother has recovered sufficient strength to permit it, say

from eight to twelve hours after birth, the child may be applied to the breast. Should it get but a trifle, even that will be of benefit to the child, and the effort will stimulate the secretion, so that after a few times it will become established. Its gradual appearance is better than to have it come in a flood, with fever after two or more days. On no account should drugs or domestic herb teas be given to the child to promote this object. A spoonful of sweetened water from time to time will be much better, or even an injection of equal parts of pure sweet oil and water.

THE DIET OF THE NURSE must be simple, easily digestible; and with a due proportion of vegetable and animal food. That which is too highly concentrated or stimulating may be injurious, by causing the milk to become too rich and unsuited to the delicate digestion of the infant. In some rare cases, wine, ale, or even porter, may be used to promote the secretion, and sustain the strength of the nurse. But evil is done in more cases than good, and in general the resort to the use of stimulants should be avoided, and the system should be sustained by those best parveyors of nature, quiet, avoidance of fatigue, anxiety, good food and sufficient sleep.

SUPPLEMENTARY DIET OF INFANTS.—The best and most natural food is the milk of the mother. Even if it only in part supplies the want of the child, it is better to retain even this, as in case of sickness of the infant, it furnishes a precious reserve to be supplied in no other way. *Cows' milk* is the most usual substitute, and should at first be diluted by adding one-third of water, and slightly sweetened. If milk is to remain some time during warm weather, it should be first heated to prevent too rapid change. Great care should be taken that the nursing bottle be *perfectly clean* and sweet; and food which has been standing, or is in danger of having deteriorated, must on no account be given. Better make that which you know to be sweet and

fresh, than to assume a risk. After some weeks the milk may be given without water, and as the first teeth appear, about the fourth or sixth month, the diet should become more varied and liberal; a well made panada, diluted milk, sweetened and thickened with a small quantity of arrow-root, sago or rusk, may be given with advantage. So barley-water, well-boiled gruel, weak chicken-tea or beef-tea, may be resorted to, taking care to give that on which the child seems to thrive best. Gradually, as the teeth appear, the child may be given the usual food from the table, and in such quantities, and in such form, as the organism seems to require.

WEANING.—The length of time a child should nurse, depends upon many considerations, such as: The health of the child, of the mother, and the season of the year, and the facility of substituting an appropriate diet. In general, a child should be nursed from nine to fifteen months. If care be taken to gradually substitute a proper diet, a child will gradually wean itself before that period. The child had better not be weaned suddenly, but gradually, and in proportion as the teeth appear. With the full development of the teeth, the organism is generally prepared to thrive without the aid of the breast. Weaning during the hot season is hazardous, from the liability to diarrhoeas, or the usual summer complaints.

## DISEASES OF INFANTS.

INFLAMMATION OF THE EYES of new-born infants may arise from sudden exposure to the strong glare of daylight. If the eyes look red, and shrink from the light, are tearful, or watery, dissolve a single pellet of SPECIFIC No. **One** in a spoonful of water, and give of this a few drops once per day for two or three days. If not cured, give a single pellet of No. **Eighteen** in the same manner, keeping the child's eyes free from the irritation of all bright light.



**COLD IN THE HEAD** usually takes the form of obstruction of the nose, impeding the action of suckling, and causing the infant to release the nipple, and rendering it irritable and fretful. If the nose is dry within, we may imitate the natural secretion by applying a little almond oil or cream, on a feather, to the interior of the nostril. Usually the **SPECIFIC No. Three**, one pellet given three times per day, will remove the difficulty. If it fails, give the **No. Nineteen** in the same manner. It may be given in water, or even dry in the mouth, after the child is some weeks old.

**CRYING AND WAKEFULNESS OF INFANTS** will, with proper care to the diet and regimen of the mother and child, be fully obviated by the use of **SPECIFIC No. Three**. Of course the child must be properly changed, made comfortable and satisfied with food; and it must not be taking, with its food from the mother, the flatulent food or exciting drinks, coffee, strong tea, or other stimulants which she imbibes. These conditions met, the **No. Three** will afford quiet, refreshing sleep and rest, and freedom from the colic and cries so common in the nursery. Of course all drops, soothing syrups, or anodynes must be banished.

**REGURGITATION OF FOOD.**—Children often in nursing overload themselves with milk, and as a salutary provision of nature, they regurgitate or throw up a portion of it. No interference is required in such cases. But where all, or a large portion of the food taken, is thrown up again, or the regurgitated matter is sour, and is followed by mucus or watery fluid, or the children are sick, or appear nauseated, medical interference is desirable. In such cases an occasional pellet of **SPECIFIC No. Ten** will correct the action of the stomach. Should there be nausea or actual vomiting, **SPECIFIC No. Six**, given as above, will be better. It may be given dissolved in a spoonful of water, or even dry to somewhat older children.

**MILK CRUSTS—ERUPTIONS.**—A scurfy eruption sometimes



appears upon the hair scalp, which in places becomes brownish bran-like. The application of a drop or two of nice sweet-oil, with the gentle aid of a soft brush or fine comb, soon removes it, care being taken not to injure the surface. Meantime a pellet of SPECIFIC No. **Fourteen**, given at night for a few days, will arrest the tendency to its production.

MILK CRUSTS; see ECZEMA, page 220. For these cases the SPECIFIC No. **Fourteen**, one pellet for infants, or two for children over one year of age, may be given morning, noon, and at night, each dissolved in a spoonful of water. If the itching is severe, causing restlessness and fretfulness, dissolve of SPECIFIC No. **One**, six pellets in as many spoonfuls of water, and of this give a spoonful every hour between the intermediate doses of No. **Fourteen**; and this No. **One** may be thus used as an intermediate remedy, so long as the itching and irritation continues. A trifle of sweet oil will at any time remove the crusts. But they had better fall off of themselves, and I advise to apply soap or water to them as seldom as the purpose of cleanliness will permit.

THRUSH OR APHTHÆ shows itself by the formation of small, isolated, round, white vesicles, which, if not checked, may run together, and present an ulcerated appearance, or form a thin, white crust, which lines the entire cavity of the mouth, and in severe cases involves the throat and entire alimentary canal. It is rarely dangerous or malignant, but occasions inconvenience besides pain and suffering, obstructing the child's nursing, and may be communicated to the nipples, causing excoriation, etc. It is often the result of imperfect ventilation, inattention to cleanliness, the nursing bottle not being kept perfectly clean and sweet, improper food, etc. Hence, infants brought up by hand, as it is termed, are more subject to the disease than others. A very weak solution of BORAX, applied to the mouth with a brush, is very generally useful. The SPECIFIC No.

**Twenty-Nine**, six pellets dissolved in as many spoonful of water, and given, a spoonful every four hours, will be found sufficient to remove the disease. When it exists in only a slighter degree, a single pellet given dry, morning and night, will be sufficient.

CONSTIPATION will rarely be troublesome among children properly nursed or nourished, and under Homeopathic regimen. But should the stools be too large, tardy, insufficient or obstructed, dissolve of SPECIFIC No. **Ten**, two pellets in two large spoonful of water, of which give one at night, and the other in the morning, and this may be continued until the dejections become natural. An enema of tepid water may occasionally be resorted to if necessary; or a suppository, consisting of a small slip of paper or linen, spirally twisted and well lubricated with oil, may be gently introduced into the rectum by a simple rotatory movement, from time to time, until the medicine has remedied the irregularity.

DIARRHÆA OF INFANTS.—Diarrhoea, like constipation, is merely a symptom and hardly a disease. The first element of a cure for diarrhoea of infants, is to carefully examine as to the quality and quantity of its food and care, and to see that these give no occasion for the difficulty. The use of SPECIFIC No. **Three** from time to time, for colic, crying, sleeplessness, or teething, will usually check any predisposition to diarrhoea, and it may be used for this purpose, giving to infants one pellet dry in the mouth after every loose or diarrhœic stool. Should this not prove sufficient, the SPECIFIC No. **Four** may be administered in the same manner, one pellet after every loose stool; thus the urgency of the symptom will be the measure of the repetition of the medicine.

EXCORIATIONS—INTERTRIGO.—Cleanliness is the best preventive; careful bathing, and taking special care that all the folds of the skin, such as the neck, groin, etc., be care-

sully WIPED DRY, but not excoriated or irritated, with lint or a very soft cloth. The SPECIFIC No. **Three** is here also appropriate to remove any tendencies to these excoriations, and may be given for such purpose, one pellet three times per day.

DERANGEMENTS DURING TEETHING.—The production of teeth, like other evolutions of the system, is attended with some degree of constitutional disturbance. In most cases and under Homeopathic regimen, these derangements are slight and easily removed, in others they may be more serious. Should there be, as is more frequently the case, RESTLESSNESS, WORRYING, sleeplessness, and tardy appearance of the teeth, the No. **Three** is the proper Specific, and may be given one pellet dry in the mouth every hour or two hours, according to the urgency of the case. If diarrhoea sets in and becomes troublesome—remembering that a slight looseness of the bowels during this period is not prejudicial—it may be controlled by the SPECIFIC No. **Four**, one pellet after every loose stool. Should there be fever or heat of the head, crying and worrying, or drowsiness, have resource at once to the No. **One**, of which dissolve six pellets in twelve spoonsful of water, and of this give a teaspoonful every hour until the fever, restlessness, or drowsiness has passed away.

The TARDY OR IRREGULAR DEVELOPMENT OF TEETH is often a subject of serious moment, indicating a want of ossific deposit either congenital or acquired. In most cases it is the result of faulty assimilation, or it may arise from defective nourishment, either in the mother's milk or other food substituted for it. But it may also arise from the *successive shock* of the system from TOO FREQUENT OR TOO COLD BATHING. And in delicate or poorly nourished infants it often happens that inconsiderate mothers or nurses prevent or retard the formation or coming forward of teeth by too frequent, too long continued or too cold bathing. To this end great care should be exercised by mothers or nurses.

CONVULSIONS OF INFANTS.—Infants are peculiarly liable to convulsions. At that early period the brain is proportionally larger, the nervous organization more delicate, and the various evolutions through which it is passing render it more liable to spasmodic or convulsive attacks, than at a subsequent period of life. The usual causes are intestinal irritation from improper food, the irritation of teething; to which should also be added hereditary predisposition in some families, all the children being subject to convulsions on very slight provocation, while in others such an occurrence is unknown. Where children are hot, feverish, either sleep too soundly, or are very restless, and *start suddenly* on dropping into a dose or at other times, the access of convulsions is imminent and demands attention. First, the occasioning cause should be removed. If the child is constipated, or if there is reason to suppose the irritation is occasioned by indigestible, bad, or irritating food, give at once a full, free injection of tepid water. Should it fail to relieve the symptoms, or to produce a full movement of the bowels, repeat it after half an hour, and even again, until the result is obtained. Meantime, if there is heat or fever, hot head and hands, dissolve six pellets of SPECIFIC No. **One** in as many spoonfuls of water, and of this give a spoonful every half hour for two or three times, and then as the heat and fever abate, give every hour until relieved. Should there be not so much heat or fever, and the irritation of teething having been the cause, the SPECIFIC No. **Three**, given as above, may be preferable to No. **One**. In case of a convulsion, but little can be done during the paroxysm; but, so soon as practicable, the feet and legs should be immersed in warm water for several minutes, and then carefully wiped dry and wrapped in a warm cloth, and a cloth wet with cold water applied to the head, and the injection beforementioned be administered. In some cases the SPECIFICS No. **One** and No. **Three**, prepared as

above, may be given alternately, a spoonful every hour, with advantage, and especially when the convulsions have been repeated, or their premonitions continue.

To DESTROY A PREDISPOSITION to convulsions or prevent the development of epilepsy, the SPECIFIC No. **Thirty-Three** may be given, one pellet every night, for three days; and the same of SPECIFIC No. **Thirty-Five** each morning, and then every second night for some weeks, giving No. **Thirty-Five** every morning.

ATROPHY OR WASTING.—In cases where children do not seem to thrive, and become emaciated and wasted, the tissue becoming atrophied, and a well marked marasmus occurs, any of the Specifics which meets these indications are efficient. Such a condition, indeed, very rarely happens under the Specific Homeopathic treatment. But should such a condition threaten, or have actually been developed, we should be guided in our choice of Specifics by the indications, thus: For enlarged abdomen, heat of the head, slow closing fontanelle, slow growth, give SPECIFIC No. **Thirty-Five**. When there is constipated habit, tardy, insufficient evacuations, deranged stomach or pale stools, give the SPECIFIC No. **Ten**. If the glands become enlarged, with knots about the neck or under the arms, frequent boils, swellings, or tumors, give SPECIFIC No. **Twenty-Three**. If diarrhoea or constant tendency to loose bowels is present, give SPECIFIC No. **Four**. These remedies may usually be given in these cases, simply one pellet for infants three times per day, dry in the mouth.

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# DISEASES OF VARIOUS ORGANS AND REGIONS.

## RHEUMATISM.

DEFINITION.—A specific febrile disorder, accompanied by acute inflammation of the white fibrous tissues,—ligaments, tendons, sheaths of tendons, aponeuroses, fasciæ, etc.,—surrounding the joints, of which several are affected simultaneously, or in succession. The local symptoms are very erratic; the skin of the affected part is covered with a copious, sour, sticky perspiration, containing lactic acid; and the blood has a large excess of fibrine, probably to the extent of thrice the normal quantity.

This very common, and sometimes quite obstinate disease, manifests itself mostly in two forms—the ACUTE or INFLAMMATORY, and the CHRONIC.

1 ACUTE, OR INFLAMMATORY RHEUMATISM,—(*Rheumatic Fever*) is usually brought on by exposure to cold, rough or damp weather, and especially to fatigue or labor during such exposure; also from sitting or standing in cold, damp places, or from sitting in a draught; sleeping in damp sheets or remaining long in wet clothes; exposure of any parts of the body to cold and moisture when other parts of the body are covered; or exposure when in a perspiration. Cold probably excites an attack of acute rheumatism by arresting the secretory functions of the skin, by means of which, in



health, morbid substances in the blood are often removed; and the functions of the skin being deranged, unhealthy principles accumulate in the blood, and rheumatism results. Mere cold, however, is not so much a cause of rheumatism as extreme atmospheric vicissitudes. Hence it is found that it does not prevail most in the coldest regions of the globe, but rather in those climates, and during these seasons which are damp and changeable. There is probably, also a rheumatic diathesis or tendency, which may be inherited. Sometimes it appears to arise from the suppression of an eruption; or the retrocession of measles, rash, or chicken-pox; or the suppression of some discharge like gonorrhœa or dysentery.

It generally commences with the usual signs of fever, associated with stiffness and lameness; chilliness and heat alternating; thirst and restlessness; coldness of the extremities, and usually constipation. After twelve or twenty-four hours the fever becomes continuous, the skin hot and dry; pulse quick, often 110 to 120 per minute. The stiffness and pain in the joints becomes more decided, with acute suffering, especially on every attempt to move. The affected parts are usually red, swollen and extremely painful to the touch. Sometimes there is excessive pain without the redness or swelling; the pain is generally worse at night, and occasionally an acrid perspiration accompanies the disease.

The larger joints of the extremities are usually the seat of the disease. It is rarely confined to one, and sometimes nearly all, either simultaneously or in turn are affected so that often the patient can scarcely move hand or foot. Often the disease leaves one ankle, knee or wrist, and locates upon another, leaving the former comparatively free. During the course of the disease, complications with the heart are liable to arise from the rheumatic process having invaded that organ, a circumstance always undesirable and sometimes quite dangerous. It is liable to occur during

very severe attacks, in young persons; in women oftener than in men; in patients who have been previously weakened; and in persons troubled with irritability or palpitation of the heart; and, also, when cold, chilling, or severe applications such as blisters, are made to the affected joint, under old-school treatment. When there is a remission of the pain in the joints, followed by anxiety, jerking, feeble or rapid pulse, and acute pain in the region of the heart, there is reason to apprehend such a transition.

TREATMENT.—At the first symptoms of *acute rheumatism*, with soreness, lameness, and pain in the part, six pellets of SPECIFIC No. **Fifteen** should be taken every hour, dissolved in a spoonful of water, and the patient should remain indoors, and keep quiet until relieved. If violent fever, heat and swelling of the part has already come on, as noticed above, indicating rheumatic fever, or a chill succeeded by heat, prepare SPECIFIC No. **One** by dissolving twelve pellets in half a glass of water, of which give a large spoonful every hour for a day, and then prepare the No. **Fifteen** in the same manner, and take the two alternately, every two hours. These should be continued from day to day, until the disease is broken up, preparing the medicine fresh every morning. Sometimes applications of cloths wrung out of tepid water, and laid on the part, are very soothing. Cold water, however, applied to the part is very liable to cause its falling upon the heart, and thus often ending with fatal results. Salves, ointments, etc., are useless. HUMPHREYS' MARVEL OF HEALING is a most valuable application for the inflamed and swelled parts, and may be applied according to directions on each bottle. ARNICA is often, but I think not so generally useful as the MARVEL.

Should there be, during the course of the disease, pain in the region of the heart, oppression or anxiety, jerking, quick or irregular pulse, or other symptoms indicating a transition of the disease to the heart, the SPECIFIC No. **Thirty-Two**

is appropriate. Dissolve twelve pellets in six large spoonful of water, and give a spoonful of the solution every two hours, and this may be continued either alone if the disease has been somewhat subdued, or in alternation with No. **One**, if there is yet fever and heat; or in alternation with No. **Fifteen**, if there yet remains merely soreness, lameness, or stiffness of the part. All to be prepared in water, and given at intervals of two hours as above directed. Bedding in blankets greatly reduces the risk of inflammation of the heart, diminishes its intensity and danger when it does occur, and at the same time does not prolong the convalescence.

CHRONIC RHEUMATISM—differs from the previous form, by the absence of the fever, redness, heat and swelling. In old cases, the affected limbs or joints lose their suppleness, and lameness and even permanent curvature or contraction results; and in some cases atrophy or emaciation of the muscles occurs. The causes are the same as in acute rheumatism, and frequent attacks of the latter rarely fail to leave some form of chronic rheumatism as a result.

SYMPTOMS generally are: Lameness, stiffness, or soreness of some particular limb or joint, or of several joints, sometimes manifested on first moving, or on exercise of the affected part, or again principally noticed when quiet. Usually the pains and the lameness are worse on changes of weather, and in rough, damp, windy weather, or on the approach of a storm.

TREATMENT.—SPECIFIC No. **Fifteen**, six pellets at a time, and four times per day, before each meal and on going to rest at night, is the appropriate treatment for almost all forms of chronic rheumatism, or for old rheumatic pains in the shoulders, hips, back, chest, side or elsewhere.

If it is associated, as is frequently the case, with some degree of dyspepsia, weak stomach, or constipation, the SPECIFIC No. **Ten** may be taken, six pellets at

night, and the No. **Fifteen** as previously directed, before meals.

Rheumatic patients should use largely in their diet, fruit and vegetables, and comparatively less meat. The vegetable acid, or acids of fruit, as obtained in *apples* baked, stewed or even raw; *lemons*, or even oranges; grapes; cherries, etc., are of great use, if not invaluable, for rheumatic patients, and should be partaken of freely.

**TORTICOLLIS.**—(*Rheumatism of the neck*).—The muscles of the neck sometimes become seriously affected with rheumatic lameness. The head is drawn to one side, or can be turned only slowly and with difficulty, the muscles on that side of the neck are lame and sore when pressed, and there is sometimes fever. It is usually occasioned by exposure to a draught of air, as when sitting near an open window when in perspiration; and is sometimes caused by a sudden jerk of the head.

**TREATMENT.**—The SPECIFIC No. **One** rarely fails to afford relief. Dissolve twelve pellets in six large spoonful of water, and of the solution give a spoonful every two hours. In rare cases the No. **Fifteen** may be used, but the No. **One** will usually afford prompt satisfaction. It is needless to say that the neck should be carefully covered and protected from draughts of cold air.

**LUMBAGO** is confined to the small of the back and the loins, rarely extending upward towards the neck, but more frequently extending down to the hips. There is seldom fever or swelling, or even soreness on pressure, but the pain and lameness is very severe, often almost forbidding motion, or change of posture, as the slightest effort brings on a renewal of the pain.

**TREATMENT.**—The SPECIFIC No. **One** usually affords prompt relief. Dissolve twelve pellets in six large spoonful of water, of this give a spoonful every hour, for the first six hours, and then prepare in a similar manner and take at

intervals of two hours, until relief is obtained. Should there be any remaining stiffness or lameness, the alternate use of No. **Ten** and No. **Fifteen**, six pellets at a time, and four times per day, will promptly remedy the defect.

SCIATIC RHEUMATISM, or “SCIATICA” may be attended with some degree of fever, and so may approach the acute form; but is more commonly without fever or any considerable degree of heat of the part, and is hence more frequently chronic.

It is characterized by pain, generally sharp, shooting and lancinating, though sometimes more dull and aching in the region of the hip, and frequently extending to the knee or the foot, following the course of the nerve of the affected side. Sometimes it is a dull aching, and may affect only a portion of the limb, or a part of the nervous track mentioned. The pain may be manifested during rest as well as during exercise or motion. It is apt to be tedious, and many persons suffer more or less from it for years in succession.

TREATMENT.—SPECIFIC No. **Fifteen** is very generally successful. For the duller and more chronic forms, six pellets taken before each meal and on going to rest at night, will be found sufficient. Should there be violent paroxysms of pain, and especially if some heat or fever be associated, give the No. **One** in alternation. Dissolve twelve pellets of No. **One** in six large spoonful of water, and the same of No. **Fifteen** in another glass, and from these give a spoonful every hour alternately, for six or eight hours, when the interval may be extended to two hours between the doses, and so continue until relief is afforded, when the treatment as for chronic cases may be adopted.

ARTHRITIS,—(*Gout*) is generally considered as a dyscrasia or peculiar habit of the body, whereby it is inclined to take on or assume a disease of a peculiar form, and when once



developed, to render it very intractable of stubborn, and only slightly influenced by the ordinary methods of cure. Its manifestations are similar in form to those of rheumatism, and all the more obstinate cases of this latter disease, or when it is frequently repeated in the same individual, are supposed to be connected with a gouty diathesis or constitution. It is quite liable to be hereditary, but need not be necessarily so, as numerous cases are found where no such transmission is evident; nor is it necessarily the result of an indolent, luxurious mode of life, though its more violent manifestations are commonly due to such a style of living.

The symptoms are usually *extreme pain* in the extremities, often, if not always, commencing at one of the great toes, and thence extending to the foot, ankle, and limb of the affected side. The pain is often extreme, if not insupportable, with extreme sensitiveness of the affected part, which becomes swelled, red, and inflamed. Sometimes it flies from one joint to another, and may even affect the head, stomach, or other part, causing very grave symptoms indeed. When the hands or other small joints have been often attacked by chronic gout, there will be deposits about the joints, which gradually or most frequently harden, causing enlargements, gouty concretions, and rendering the hands or fingers stiff, unwieldy, or even distorted.

The TREATMENT is the same as for acute or chronic rheumatism, aside from the fact that in gout, or rheumatic gout, the functions of the stomach and kidneys are almost invariably involved; and hence the SPECIFIC No. **Ten** may be profitable, and either as an intercurrent remedy, or in alternation with No. **Fifteen**. Usually No. **One** and No. **Fifteen** for acute attacks, and the latter with No. **Ten** in alternation for old, chronic cases, will accomplish as much as can be done under domestic management.

ACCESSORY MEASURES.—During an attack of gout, the



affected limb should be raised, so as to favor the free return of blood to the heart; the application of flannels wrung out of hot water, hot bread-and-water poultices, or *spongipiline*, after immersion in hot water, often do good. In acute attacks, the patient should be restricted to farinaceous diet—arrowroot, tapioca, sago, bread, etc.—and milk; water, or toast-and-water, *ad libitum*. As the febrile symptoms decline, a more generous diet may be gradually allowed; at the same time, the patient should resume daily moderate out-of-door exercise as early as he is able.

PREVENTIVE TREATMENT.—1. *A well chosen diet*.—This should include both animal and vegetable food; be adapted in quality and quantity to the ability of the stomach to digest; and at the same time furnish sufficient nourishment out of which pure blood can be formed. Codfish, mutton, tender beef, fowl, and game may be eaten; salmon, veal, pork, cheese, and highly-seasoned dishes are unsuitable. The consumption of animal food should be moderate; and acidity guarded against by avoiding pastry, greasy or twice-cooked meat, raw vegetables, highly-seasoned food, and anything likely to lead the patient to eat more than is strictly moderate. The wines most likely to injure are port, sherry, and madeira. If wine be taken at all, good claret, free from sugar and acidity, is best. When gout attacks a patient early, entire abstinence from all alcoholic beverages is one of the most likely measures to check its future development; but aged persons, and others whose health has been much enfeebled, may be allowed a small quantity of stimulants, such as the particular circumstances of each case seem to justify. For, although a plan can be sketched out which may apply to the majority of cases of gout, still each case not only exhibits its own peculiarities, and becomes a separate study, but likewise demands, in certain respects, a separate treatment. 2. *Healthy action of the skin* should be promoted by bathing, warm clothing,

rough towels, bath-brushes, etc., for much excrementitious matter is got rid of in this manner. Friction over the whole surface of the body is extremely useful when exercise cannot be taken. The patient should be well rubbed with a flesh-brush, or with the hands, twice a day. 3. *Good habits.*—A life of indolence should be exchanged for one of activity and usefulness. Exercise, not severe or exhausting, should be taken regularly. Walking, so as to secure an abundance of fresh air, must ever be considered the best exercise, but it may be conjoined with riding. Without sufficient exercise, probably every other measure will be unavailing. Early and regular hours should be observed, and severe or prolonged mental application avoided. In some cases, subsequent attacks may be warded off by removal to a warm and dry climate, during winter and spring.

## GENERAL DEBILITY.

General debility or physical exhaustion may be caused by taxing the physical powers beyond their endurance. It usually accompanies and is the result of nervous prostration. It may be the result of long continued illness where the convalescence is slow and prolonged. It is very often the result of malaria. That form of influenza commonly known as La Grippe or Grip is often followed by physical weakness amounting at times to extreme exhaustion. Ill nutrition and malassimilation from weakened digestive organs are prolific sources of general debility. Also Diarrhea, Leucorrhea and prolonged lactation.

The symptoms of General Debility and physical exhaustion are too well known to require any detailed description. Languor, lassitude, weakness, lack of strength, dragging of the legs, inability to make any muscular or physical effort, such are the common conditions.

TREATMENT.—In case of extreme general debility or physical exhaustion, after long continued illness, it may be well to begin with a milder form of tonic by giving six pellets of No. **Twenty-four**, four times per day. As the patient gains in strength a stronger tonic is needed, in which case give two or three **Tonic Tablets** before each meal and upon retiring. The **Tonic Tablets** should be taken in every case of malaria and following every case of Grip.

## NERVOUS PROSTRATION, NEURASTHENIA.

The exigencies of modern life with its attendant stress and strain tend toward the development of Neurasthenia,

commonly called Nervous Prostration. Few individuals escape its manifestations in some form during their lives. It varies in degree and intensity, from the slight symptoms of nervousness to the more profound and complete condition of nervous prostration.

CAUSES.—It is beyond question that neurotic conditions exist in certain families and are transmitted from parents to children. It is a matter of daily observation that members of certain families show a tendency to the various forms of nervous disturbances than other families; are more emotional, temperamental, more often show evidence of nervous derangement and prostration.

A person possessing a well balanced and well organized nervous system may eventually suffer from Neurasthenia or nervous prostration, through worry incidental to an active business life, or worry and care in domestic life. The strain of professional life among lawyers, doctors, clergymen and teachers, and especially the high pressure energy of journalism add largely to the number of sufferers.

Infectious diseases, especially epidemic influenza or Grip, excessive use of alcohol, tobacco or drugs, excesses of every description are predisposing causes. Functional derangement of the various secretive organs, and any drain or depletion of these organs finds its response in disorders of the nervous system.

SYMPTOMS.—The patient is restless, nervous or irritable, becomes depressed and despondent; takes a gloomy view of life, is a prey to anxiety, has a fear of death or loss of

property; fears that he is suffering from various forms of diseases, or that he may become insane. The impulse toward suicide is often tempting and almost overpowering. He sleeps poorly, with interrupted sleep or entire wakefulness; complains of backache, headache, dull in character and located at the back of the head. There is more or less of physical exhaustion, with heaviness and sensation of weakness, especially of the lower extremities, with dragging of the legs; the feet are cold and clammy with perspiration of the hands and feet, irritable bladder with frequent urination, functional weakness of the various organs, depressed functional activity, due to depletion by loss of fluids such as prolonged lactation in women. There is usually weakness of digestion with poor appetite, capricious or irregular, vertigo, trembling, and a feeling of compression over the chest and palpitation of the heart.

TREATMENT.—In extreme cases of nervous prostration attended with physical exhaustion, absolute rest is essential. In milder cases gentle physical exercise, never pushed to the limit of endurance is very beneficial. In all cases plenty of outdoor fresh air, well ventilated rooms, especially the sleeping room and easily digested nourishing food, all the patient can digest and properly assimilate. Tea, coffee tobacco and spirits should be strictly forbidden. Ale or Brown Stout may be given where the stomach will tolerate them, and provided the nervous symptoms are not thereby exaggerated.

It is difficult to lay down any hard and fast rules; each patient must be a law unto himself, and by experience

determine what is injurious and what is beneficial. With extreme exhaustion port or sherry wine or a light wine may prove beneficial, and in other cases may increase the hearts irregular action, causing palpitation and other annoying symptoms.

Give six pellets of No. **Twenty-eight**, four times a day, and when there is much physical exhaustion and loss of appetite with impaired digestion take two or three **Tonic Tablets** before each meal and before retiring for the night.

### SLEEP AND SLEEPLESSNESS.

The precise number of hours required for the sleep of each individual daily can be subject to no fixed rule. It differs at different periods of life with the habits, occupation and general health and nutrition of each individual. Some temperaments require more sleep than others, women almost always more than men, and children far more than either. The infant may profitably sleep eighteen of the twenty-four hours; young children may well sleep ten or twelve hours at night, and have an additional *siesta* during the day; and those that perform severe physical or mental labor, cannot well do with less than nine or ten hours daily. Those who are engaged in light physical or mental labor, will frequently find the wants of nature satisfied with only six or seven hours sleep. Some individuals of remarkable mental and physical endurance, in the midst of the greatest peril or excitement, seem to require but two or three hours of sleep in the twenty-four. But these are exceptional cases. Every individual should take so much of rest and sleep as is required for the restitution of his or her body,



strength, and recuperation from fatigue. If nature is long or systematically denied this, there will sooner or later come a terrible retribution, often in failing health, or some nervous disorder or disease of the heart. Several eminent literary men have fallen victims to disease of the heart, attributed solely to incessant mental occupation, carried persistently into the hours which should have been given to sleep. The use of tea or coffee best sustains the system and prevents the waste and wear incident to long watching and severe night work; tobacco may to some extent have a similar conservative effect; but none of them, or all, can more than palliate the serious ill effects of long-continued want of sleep.

The night is the best time for sleep, and it is doubtless true that two hours sleep before midnight is worth as much as four hours after that period. The more nearly sleep can be taken to the hours of darkness, and the earlier we can arise after the morning light the better. From eight or nine o'clock at night, to four, five, or six in the morning, according to temperament, vocation and circumstances, are probably the best hours for repose. During the long warm days of summer, a *siesta* of an hour in the early afternoon is for most persons of leisure as enjoyable as it is allowable, and for young children it is indispensable.

SLEEPLESSNESS,—(*Insomnia*).—It not unfrequently occurs that persons are unduly wakeful; they either do not sleep soundly, or find it difficult to go to sleep; are easily waked after a short sleep, or their sleep is unrefreshing. Sometimes, while there is an earnest longing, or a desire to sleep, there is a thronging of ideas and restless tossing, that wears away a good part of the night without sleep; or after finally falling to sleep, the slumber is but slight, and they arise unrefreshed, with the demands of the system unsatisfied.

Such a condition has always something of disease or

undue excitement connected with it. The excessive use of tea or of coffee may produce it. Too intense or long-continued mental excitement; some forms of dyspepsia or gastric derangement; innervation of the system from insufficient nutrition, or a feverish excitement of the system and afflux of blood to the head; or chronic tendency of blood to the head, may have this condition of sleeplessness or undue wakefulness as a result.

TREATMENT.—In general, the SPECIFIC No. **One** will be sufficient to afford quiet and refreshing sleep, and more especially when it is occasioned by undue excitement or accompanied with throbbing of the vessels or heat of the head. Take six pellets on going to rest, and repeat them every hour until sleep intervenes. If it seems to arise from mere nervousness, without other apparent cause, use SPECIFIC No. **Three** in the same manner, six pellets every hour, until quiet sleep is induced. If it has been occasioned by too intense or long-continued mental application, and more especially if connected with indigestion or gastric derangement, the No. **Ten**, six pellets taken three times per day and at night, will be found corrective.

NIGHTMARE.—(*Incubus*).—See page 351. Aside from hygienic care, the use of SPECIFICS No. **One** or No. **Ten** will be sufficient. No. **One**, six pellets morning, and at bedtime, when the nightmare is attended with heat, fever, thirst, throbbing of arteries, or heat and fullness of head. No. **Ten**, six pellets, twice a day, the last dose at bedtime, when the trouble is due to sedentary habits, constipation or indulgence in wine. In chronic cases No. **One** in morning, and No. **Ten** at night, six pellets at a dose.

## AFFECTIONS OF THE NOSE.

SWELLING AND REDNESS OF THE NOSE, more particularly of the extremity, is common among persons addicted to the

use of ardent spirits, and among luxurious livers. But it occasionally occurs among the temperate and frugal, causing an unsightly redness of the nose, and a swelling, or even thickening of the integument covering the organ, at once disagreeable and unsightly. The affection is apt to become chronic, increasing from year to year, unless removed by proper regimen and medication.

**TREATMENT.**—Whether the difficulty has been occasioned by the free use of stimulants, or a luxurious mode of life or not, it is evident that this should be corrected, and a frugal diet free from exciting or stimulating food, and absence from stimulants be enjoined. The SPECIFIC No. **Thirty-Five** may be taken, six pellets each morning, and the same of No. **Fourteen** at night. This may be continued until the redness and swelling are removed.

**ULCERATION OF THE NOSE.**—The nose, especially the internal nostril, becomes occasionally the seat of frequently recurring ulcerations. The lining membrane becomes sore, ulcerated, crusts form from time to time, and become detached with frequent bleeding.

**TREATMENT.**—No. **Thirty-Five** and No. **Fourteen** are curative, and may be used, six pellets morning and at night in alternation, as in case of redness and swelling of the nose.

**NOSE BLEED.** — (*Nasal Hemorrhage*).—Bleeding from the nose may in some cases be not only disagreeable, but even dangerous. When it is but slight, occurring as it often does in children, or plethoric adults, and attended with fullness and heat of the head, to which the bleeding affords relief, it may be considered almost salutary, and need not be interfered with. But when it occurs in the course of low fevers, consumption, or other debilitating disease; or when it is frequently repeated from apparently slight and insufficient causes, or when it is severe and prostrating, it should demand attention.

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**TREATMENT.**—Sometimes merely extending the arm and hand of the side upon which the bleeding occurs, upwards over the head, will arrest the bleeding. The application of the **MARVEL OF HEALING** rarely fails, even in the worst cases. Wet a linen or cotton rag with the **MARVEL** folded one or more times, and lay over the nose, covering it from the eyebrows down, and keep this wet with the same, and take ten drops in a spoonful of water every fifteen minutes, until relieved. In extreme cases the **MARVEL** may be injected into the nostril with a small syringe, or the nostril may be plugged with lint wet with the same.

If the **MARVEL** is not at hand, cold water may be applied to the bridge of the nose, and six pellets of **SPECIFIC No. One** may be given in a spoonful of water, and repeated as above every quarter or half hour.

When persons, especially children or young girls, are subject to frequent recurrence of nose-bleed, the use of **SPECIFIC No. Eleven**, six pellets, taken morning and night, will permanently correct the evil.

### SWEATING OF THE FEET.

Some persons are habitually subject to perspiration of the feet; sometimes excessive in quantity, but more commonly rank or offensive. It is not always permanently removed by bathing, though this is of course important, but depends upon a morbid condition of the sebaceous glands and follicles, and is a proper subject of medical treatment.

It will be removed by the use of the **SPECIFIC No. Twenty-Two**, of which six pellets may be taken at night and morning, which may be continued at the discretion of the patient. It is sometimes wonderful, how a few doses of the appropriate remedy will remove an inconvenience of years standing.

DROPSY, GENERAL AND LOCAL.—(*Anasarca*,  
*Œdema*, etc.).

DEFINITIONS.—A serous or watery accumulation in the areolar tissue, more or less general throughout the body, with or without effusion into the serous cavities.

In itself it is less a disease than a result or product of some diseased condition of the organs or tissues involved. As a consequence, a larger portion of fluid is secreted or deposited than is taken up, resulting in an accumulation of fluid, or dropsy. The symptoms, or manifestations, will vary with the condition of the organs involved, the location and quantity of the fluid; and almost invariably it will be found that the functions of the skin and kidneys, the usual emunctories of the body, have become impaired, and that a cure will be effected by their increased activity.

Dropsy is of two distinct varieties; for, besides its occurrence in the meshes of the loose tissue beneath the skin, it may take place as a *local* dropsy in any of the natural cavities or sacs of the body, and is named according to the parts involved. If the accumulation occur in the ventricles of the brain, it is called *hydrocephalus*; if in the membrane that lines the surface of the lungs, *hydrothorax*; if in the membrane of the heart, *hydropericardium*; if in the membrane of the intestines, *ascites*; if in the serous sacs of the joints, *hydrods articulorum*; if in that of the testicles, *hydrocele*.

CHARACTER OF THE SWELLINGS.—Dropsical swellings are soft, *inelastic*, diffused, and leave for some time the indentation made by the pressure of a finger. In chronic cases, and when the cedema is very great, the skin becomes smooth, glassy, and of a dull-red or purple color; and where the skin is less elastic, as over the tibia, it becomes livid or blackish, and troublesome, even gangrenous, or sloughs may form.

**ACCESSORY TREATMENT.**—In acute dropsy, the diet should be similar to that in acute fever; in chronic dropsy, patients require nourishing diet, but on account of the extreme feebleness commonly present, only easily digestible food should be taken. To allay burning thirst, cold water is the best beverage; but any other that the patient desires, if not positively injurious, may be taken. Water is a real restorative, for it increases the amount of fluids excreted to an extent greater than its own bulk; it also tends to improve the appetite and strengthen the pulse, while it diminishes the dropsical collections. It will thus be seen that the common notion that drinking water increases dropsy is quite erroneous.

*Warm baths* for promoting perspiration, small doses of *Hollands*, tapping, and other palliative measures may sometimes be necessary; but the propriety of such means can only be decided by the circumstances of each individual case.

**ANASARCA.**—(*General Dropsy*).—**SYMPTOMS** are: An œdematous swelling of the surface of the body and limbs, commencing first on the most depending portions of the feet and legs, and then gradually ascending to the abdomen, hands, face, and other portions of the body. The surface is pale and cold, has a doughy feel, and *pits on pressure*. The secretions become scanty, urine scanty, high-colored, skin dry and bowels confined. Added to these may be symptoms arising from the condition of the organs and tissues primarily involved. It may arise from various causes, among which are prominently—disease or defective action of the kidneys; the localization of the poison of scarlatina; disease of the liver or spleen; and the use of various drugs employed in the treatment of INTERMITTENT FEVER, as arsenic, quinine, etc.

**TREATMENT.**—The use of the SPECIFIC No. **Twenty-Five** will be the appropriate remedy in this form of dropsy, and



may be given, according to the urgency of the case, six pellets at a time, dissolved in water, and repeated three times per day for slight cases, or every two hours in the more severe ones.

Dropsical patients require a warm, dry, uniform temperature, and an elevated location if obtainable, with mild, easily-digested food, and the bowels in a free if not relaxed condition.

**HYDROTHORAX.**—(*Dropsy of the Chest*).—Is one of the most difficult and unmanageable forms of this disease, occurring mostly in elderly people, and often connected with disease of the heart, or protracted pleuritic or pulmonary inflammations. The symptoms are: Difficult, anxious, labored respiration, worse when lying down, or inability to recline, (the head must be kept elevated), blueness or pallid face and lips; starting up in affright on dropping to sleep with more rapid breathing, as if in danger of suffocation; scanty secretions and gradual swelling of the feet and abdomen.

The **TREATMENT** is more difficult and the result uncertain. The **SPECIFIC No. Twenty-Five** may be given, six pellets dissolved in water and repeated every three hours. In case of violent paroxysms of oppression, the **No. One** may be given, a like quantity in water, and repeated every hour between the doses of **No. Twenty-Five**, as an inter-current remedy, until the paroxysm has subsided.

In case the dropsy of the chest is complicated with disease of the heart, indicated by irregular or labored action of the heart, the **SPECIFIC No. Thirty-Two** may be given in alternation with **No. Twenty-Five**, six pellets every three hours. Diet and regimen as for general dropsy.

**ASCITES.**—(*Dropsy of the Abdomen*).—is manifested by gradual enlargement of the abdomen, sometimes commencing almost imperceptibly and at others with greater rapidity. The swelling usually commences in the vicinity of the stomach, and thence extends over the entire abdomen.

There is, with the enlargement, difficulty of breathing on exercise; sallow complexion; dry skin; scanty secretions; high-colored urine. There is also a feeling of languor and debility, and stiffness when attempting to bend the body. It may arise from peritoneal inflammation, or from enlargement and disease of the liver, or from some constitutional disturbance.

The TREATMENT is the same as for general dropsy, six pellets of No. **Twenty-Five**, and given at intervals of two or three hours, according to the urgency of the case. Diet and regimen as for general dropsy.

### INTESTINAL WORMS.

The human system, in common with the entire animal kingdom, is subject to numerous parasites, or *entozia*. These have their abode either upon the surface, or along the intestinal tract, or within the cavities, or even in the more solid substances or muscles of the body. They are found in all animals and fish, as well as the human species—those in apparent health as well as those that are sick—and the part they play in the economy of nature is confessedly obscure. It is generally conceded that it is only in peculiar or morbid conditions, or under a course of diet and regimen unfavorable to health, that they multiply or increase to such an extent as to become of themselves a source of irritation and disease. It is under these conditions that INTESTINAL WORMS become the subject of medical treatment.

The more important varieties of intestinal worms are:

FIRST—The *seat worm*, or *thread worm*, usually called *acarus*. This parasite is from a third to half an inch in length, white, slender and very active. They inhabit principally the lower intestine and rectum. They are more common in children than in grown persons, though the latter are by no means exempt from them. It is not known

how these worms originate, since they have even been known in infants at birth. But one fact is well ascertained: that children who live mostly on farinaceous food are most subject to them.

**SYMPTOMS.**—By their constant and active motions they cause a tickling and irritation in the anus, which obliges the child or patient to scratch and rub the part; as a consequence of which we frequently find a catarrhal inflammation of the mucus membrane of the anus or even a mucus discharge from the part; also a swelling of the veins distributed over the locality, and not unfrequently straining or tenesmus. From the tendency of these seat-worms to travel, in order to deposit their larve or eggs, they sometimes, in the case of females, enter and irritate the vagina; or, in males may occupy the folds of the prepuce, in either case causing intolerable itching and irritation, and occasionally inducing the bad habit of masturbation.

Aside from the medical hints given further on, great care should be taken with children in whom they are discovered, or when from the actions of the child their presence may be suspected, to prevent their accumulation and to remove them. Cleanliness, frequent bathing of the parts, injections of cold water, are generally sufficient to remove the parasites and relieve the irritation. Should it be necessary to remove them from the rectum, this may be readily and conveniently done by injecting an ounce of *olive oil*, with which the worms will usually come away in a mass.

Should the child be restless at night or feverish from the irritation occasioned by them, a dose of two or three pellets of SPECIFIC No. **One** will be sufficient to subdue it.

For the permanent eradication of these seat-worms from the system, give three pellets of SPECIFIC No. **Two**, morning and noon, and the same quantity of SPECIFIC No. **Ten** at night, and six pellets for adults; and continue this course until the object is attained.

**SECOND**—The *Round Worm* (*ASCARIS LUMBRICOIDES*) is the next species more commonly met with. It is of cylindrical form, pointed at both ends, from six to nine or even twelve inches in length, and of the thickness of a goose quill, thus resembling somewhat the common earth-worm. Its body, however, is half transparent, and of a whitish, yellowish, or even brownish hue. They are of both sexes, and the females are more numerous than the males.

This worm principally inhabits the small intestines, but it is not unfrequently found in the stomach, and from thence sometimes mounts along up the œsophagus into the throat and mouth, or nose. Attacks of violent, incessant, spasmodic cough are often produced by the attempted passage of a worm into the pharynx. Doubtless, other grave disturbances or morbid conditions are produced, from the presence of these vermin in the neighboring parts.

**SYMPTOMS.**—These worms may exist in considerable numbers without causing any serious disturbance. But in the majority of cases they *occasion gripings in the abdomen; enlarged or hard, prominent abdomen; mucus diarrhœa; occasional vomiting; irregular or capricious appetite.* There are also from time to time sympathetic symptoms, such as *itching of the nose, or of the anus or genitals; increased flow of saliva; restless sleep; with frequent starting or grating of the teeth.* Beside the above more decided symptoms indicating the presence of worms, authors have enumerated the following as manifestations of the worm cachexy: *Palor and sickly appearance of the countenance, and occasional flushing of the cheeks; bluish circles under the eyes; dilated pupils; headache or vertigo; voracity or irregular appetite; offensive or fetid breath; acrid eructations; occasional nausea or vomiting; foul or coated tongue; tensive fulness of the abdomen, and gnawing or burning in particular parts of the intestines; hard, tumid abdomen; great thirst; discharge of mucus from the bladder, rectum or vagina; slight febrile*

symptoms, or erratic remitting fever; nocturnal wakefulness, with low spirits and irritability of temper. We occasionally notice an inflammatory redness of the nostrils, with great disposition in children for picking or boring into the nose; and sudden screaming on awaking, or grating of the teeth in sleep, and involuntary flow of saliva during sleep; also at times, and in sensitive subjects, spasmodic or even convulsive attacks.

These symptoms, indicating the presence of worms, are largely influenced by the regimen and diet of the patient, and even by the season of the year and the lunar phases. Such articles of diet as milk, sugar, preserves, candies and pastry, and sometimes pungent salted food, ham, cheese, etc., produce an aggravation. The leucophlegmatic habit appears to favor their production, and the female more than the male sex.

THIRD—The common *Tape Worm* (TENIA SOLIUM). It is only rarely met with in this country. It consists of a *head* not larger than a pin's head, in which there are four sucking cups and their armature; a *neck*, which is an inch or more in length, very slender and without joints; and the *body*, consisting of a long row of flat, ribbon-like segments, each of which is rectangular in shape and increasing in size towards the caudal extremity. These segments have each the male and female organ, and at the caudal extremity the ripe eggs. There may be several hundred of them, each half or three quarters of an inch in length, and the entire animal may measure several yards. From time to time, the lower segments or joints, as they are termed, ripen, and are pushed off, and appear in the evacuations; and these eggs, being taken by another organism (the hog), form in its organism grubs; and these again taken into the human system by a subsequent metamorphosis become the original *Tenia* in the human subject. It rarely happens that more than one of these unwelcome guests are found in the human



intestines at the same time, yet there are cases on record where two or more have simultaneously existed in the same person. They are usually found in those regions where people are accustomed to eat raw or not well cooked pork, or sometimes dried or jerked beef.

The symptoms of *Tape Worm* are all equivocal, unless the segments or joints of the worm itself are discovered in the discharges. Some individuals experience not the slightest inconvenience from it. Others complain of severe pain in the stomach; nausea; vomiting; ravenous hunger, even to fainting. The abdomen is sometimes bloated, sometimes contracted. In some cases there is diarrhœa, in others constipation. Among the sympathetic symptoms are: itching of the nose; vertigo or dizziness; getting dark before the eyes; noises in the ears; palpitation of the heart. These symptoms are ameliorated in most cases by the use of certain kinds of food, such as milk, eggs, mild soups and meat not spiced; while they are produced or aggravated by the use of acids or sour things, especially pickles, spiced with vinegar and pepper, smoked herring, horse radish, cranberries, strawberries, etc. Sometimes, after eating these latter substances, segments of the worm are discharged, and the diagnosis thus established.

For the treatment and permanent removal of the *Tape Worm* the amateur practitioner will be able to do but little. Fortunately, these cases are rare in this country; and where the patient is living wisely, and constantly using appropriate Homeopathic medicine for any occasion that may arise, the *Tape Worm* will not be troublesome. Practitioners use with success *Koussou*, or the flowers of the *Brayera Anthelmintica*, an infusion of two drachms in a tumbler full of water, and letting it stand over night, strain off, and, after taking a cup of coffee to prevent nausea, take half the portion and the remainder half an hour later. The parasite is often carried off after a few hours. The use of large quan-



tities of *pumpkin seed* tea, or of the slippery elm in form of a tea, or by chewing the bark, is often effectual in stupifying and expelling the animal.

GENERAL TREATMENT.—*Fever* is one of the most common and the most urgent symptoms of verminous irritation, and is usually the more violent in proportion as the worms are higher up in the intestinal track. The fever is characterized by its unsteady character, at times becoming quite violent with red face, or one cheek red and the other pale; white or pale lips or around the mouth; quick pulse; heat of the surface and restless tossing and anxiety; startings on going to sleep, indicating a tendency to convulsions, or even convulsive attacks. It will be generally found on inquiry that the attack of fever has been provoked by some grave error in diet, or exposure, or both—commonly the eating of cake, candy, sweet meats, raisins or other pernicious articles of food, has been sufficient to derange the stomach—to which the irritation of the worms was soon added.

*For such an attack of fever*, dissolve at once twelve pellets of SPECIFIC No. **One** in as many teaspoonsful of water, of which give a spoonful every hour, until four or five doses have been given; then prepare of SPECIFIC No. **Two** in the same manner, and give of the two, in alternation, at intervals of an hour, until the fever has abated, when the intervals may be prolonged to two or three hours, until a cure is effected.

Should the fever be quite high, *and there be twitchings*, or startings, or great nervous excitement, rendering the danger of convulsions imminent, lose no time in giving a full *enema* of warm water, so as to secure a free movement of the bowels, and even repeat it, if necessary.

After the storm has passed over, and the fever been allayed, a dose of two pellets of SPECIFIC No. **Ten**, for children, given night and morning, will best restore the normal state of the digestion.

For vague, uneasy or colic pains in the bowels, arising from the presence of worms, the use of the SPECIFIC No. **Two**, giving to children two or three pellets four times per day, will be sufficient. Should it have become worse or complicated by the use of indigestible food, the SPECIFIC No. **Five** may be given instead of No. **Two**, in the same manner.

*For the permanent eradication of worms from the system* the use of SPECIFIC No. **Two**, giving three pellets four times per day, always before meals, and on going to rest, will be sufficient. If, as in many cases, there is imperfect digestion, or some degree of dyspepsia, the end will be more readily obtained by giving the No. **Two**, for children two pellets before meals, and a like dose of SPECIFIC No. **Ten** on going to rest at night.

THE DIET in children affected with worms is important. They should not be constantly eating, always "having a piece in the hand." Let them have regular meals, and eat at meal time; rarely except at meals, so that the digestive organs may have rest. Give the child plain, wholesome diet, meat once per day, no pastry, pies, cakes, sweetmeats, raisins or candies, or these as rare and seldom as possible. Under such treatment and management the trouble from worms will be very slight indeed.

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For Inflammation and Congestion of the Head or Brain; Inflammation of the Eyes; Inflammation of the Throat, or Quinsy, alone, or in alternation with No. **Thirty-four**; Pneumonia, or Inflammation of the Chest or Lungs, Inflammation of the Pleura (Pleurisy); Inflammation of the Liver and of the Bowels; Fevers of Children; Measles;

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For Fall Dysentery or Bloody Flux; Slimy, Scanty Mucus; Greenish and Bloody Stools, attended with violent Colic or Straining and Tenesmus; Painful Diarrhea; Colic; Bilious Colic; Hemorrhoidal Colic. Price, 25c. and \$1.00

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For Sickness at the Stomach; Vomiting with Diarrhea; Thin, Loose, Urgent or Rice-Water Stools, with Vomiting, Coldness, Paleness, Blue Lips and Cramps; Morning Sickness. Price, 25c. and \$1.00

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For Cough, with Pain and Stitches in the side or Breast; Cough with Pain or Soreness in the Throat and Bronchia; Hoarseness or loss of Voice in Clergymen; Sore Throat; Inflammation of the Lungs or Pleura, given after or in alternation with No. **One**. Bronchitis or Laryngitis, with cough, Hoarseness, Loss of Voice or Weak Voice, Scanty Expectoration and Emaciation. Often used in alternation with No. **One**, especially if there is heat or fever. Price, 25c. and \$1.00

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For Bilious Headaches; Nervous Headaches and Sick Headaches, with Nausea and Vomiting; Congestive Headaches, also No. **One**; Vertigo or Dizziness; Swimming of the Head; Heat, Heaviness or Fullness of the Head, also No. **One**. Often used in alternation with No. **One**, for Congestive Headaches; or with No. **Twenty-four** or **Tonic Tablets** for Bilious Headaches. Price, 25c. and \$1.00

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For yellowish, thick, offensive or corrosive discharge; Menses too soon and too long continued; too profuse and debilitating Menses; Constant Bearing Down; Old Debilitating Leucorrhœa. Price, 25c. \$1.00

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For Hoarse, Croupy Cough; Inflammatory Croup; Spasmodic Croup, with Quick Pulse, Hot Skin Difficult, Labored Breathing and Hoarse Cough; Laryngitis, with hoarseness, Pain in the Throat. Painful Cough and Scanty Expectoration. Price, 25c. and \$1.00

**No. 14** { **Eczema, Eruptions, Salt Rheum,**  
**for** { **Acne, Erysipelas**

With Hot, Smooth, Swelled skin or blisters; Salt Rheum, or Rough, Scaly, Chapped Eruption on the Hands or other parts; Pimples or Blotches on the face; Prickly Heat; Nettle Rash like Stings of Insects; Scald Head. Price, 25c. and \$1.00

**No. 15** { **Rheumatism; Lameness, Stiffness**  
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For Acute Rheumatism, with Painful, Hot Swelling of the part; Chronic Rheumatism, with Lameness, Stiffness and Soreness of the part; Sciatic Rheumatism, with pain in the Hip, Knee or Leg of the affected side; Lumbago, or pain across the Loins or Back; Old Rheumatic Pains or Lameness. In alternation with No. **One**, for the acute form, and in alternation with No. **Ten**, for Chronic Rheumatism. Price, 25c. and \$1.00

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For Asthma, with Attacks of Oppressed, Labored, Difficult Breathing, Cough and Expectoration; Dry Asthma; Humid Asthma; Stridulous or Sighing Respiration. Price, 25c. and \$1.00

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For Enlarged or Inflamed Glands under the Jaw around the neck or under the Arm-pits; Itching and burning of the legs. Price, 25c. and \$1.00

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For Loss of Appetite; Weak or Impaired Digestion; Loss of Strength After Long Illness; Debility Following Malaria;

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For Anasarca or General Dropsy; Dropsy of the Abdomen; Dropsy of the Chest, Heart or Head; Dropsy with Tumid Doughy Swellings and Scanty Secretions, Dropsical Swelling of the Feet or Legs. Price, 25c. and \$1.00

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For Frequent, Painful or Scalding Urination; Inability to retain the Urine; Catarrh of the Bladder, in alternation with No. **Twenty-seven**; Frequent Scalding Urination, with Mucus Discharge; Urine loaded with Mucus; Nightly Wetting-the-Bed in children; Nocturnal Urinary Incontinence. No. **Thirty** is to the bladder and passages what No. **Twenty-seven** is to the kidneys—hence so often used in connection. Price, 25c. and \$1.00

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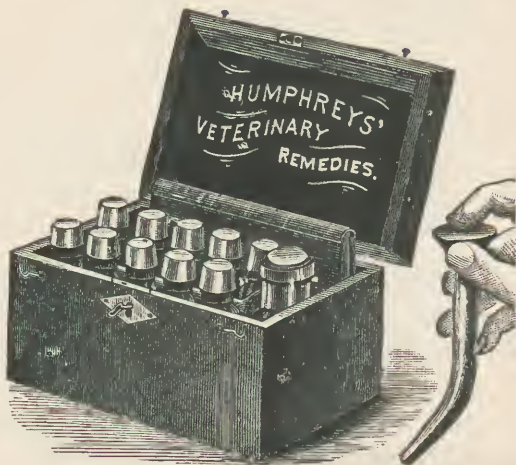
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